Now Accepting Applications for positions beginning as early as July 2022: TL1 Postdoctoral Program in Clinical Research, Biomedical Informatics, and Health Equity

First application review deadline: June 8, 2022, 5 pm Central Time
Positions may remain after June 8, 2022; please contact Kelsey Bogue at kbogue@bsd.uchicago.edu and Absera Melaku at amelaku@bsd.uchicago.edu if you plan on submitting after this date.

About: The TL1 Postdoctoral Program in Clinical Research, Biomedical Informatics, and Health Equity is a National Research Service Award (NRSA) funded training program comprising participating degree programs at the University of Chicago, Rush University, and Loyola University Chicago. The program will prepare postdoctoral trainees with clinical (MD, DNP, PharmD, DMD/DDS, etc.) or research degrees (PhD) with the skills to conduct independent and collaborative research that will transform the science and practice of medicine, improve clinical practice and health outcomes, and advance health toward health equity.

Trainees can be based at any ITM institution and will select one of three training pathways based on their research interests and training needs: 1) Clinical Research Pathway, 2) Medical Informatics Pathway, or 3) Public Health Pathway. Depending on the selected pathway, trainees will enroll in one of the approved master’s programs listed in this RFA. See Program Activities for more information.

The TL1 program is currently undergoing its five-year competitive renewal process. This means that we can only offer provisional offers into the TL1 program until the notice of award is released in late spring or early summer 2022.

Who should apply?

1) MD clinical fellows based at an ITM institution (UChicago, Rush, IIT, Loyola, NorthShore, or Advocate) who are interested in full-time research training. These might be fellows currently in research years of their ACGME training or finishing their ACGME training.

2) Candidates with other doctoral level professional degrees (DNP, PharmD, DDS/DMD, etc.) at an ITM institution who are interested in research training. Candidates with an MD who have not yet begun residency are also eligible.

3) PhD recipients committed to careers in clinical or translational research with an emphasis on advancing health toward health equity. Candidates may apply externally or from an ITM institution.

4) Prospective applicants who fall outside these categories should contact the program team to determine if they are eligible to apply.

5) Applicants who are from underrepresented racial and ethnic groups, who have disabilities, and/or who are from disadvantaged backgrounds are strongly encouraged to apply. Learn more here.

Applicants do not need to have prior training or research experience in health equity or health disparities, but should describe how their TL1 training will (1) enhance their research and career goals and (2) how their research goals would help advance health equity.
MD candidates will need commitment letter from a unit leader (Fellowship Director/Section Chief/Department Chair) who is able to attest to institutional commitment for the candidate. This letter must confirm the following: 1) The section/department will take necessary steps to transition fellow to an Advanced Clinical Fellow (or their institution’s equivalent) position by the start date of the TL1 appointment; 2) The section/department will cover the difference between the NRSA stipend provided by the TL1 grant, allocated according to years of experience, and the fellow’s stipend level set by their institution’s GME office; and 3) If awarded the TL1, the fellow will have 80% protected time based on a 40 hour work week during the appointment period for research and training activities.

PhD candidates will need to demonstrate a commitment to clinical and/or translational research in their application.

Most internal candidates have a primary mentor who should prepare one of the letters of recommendation for the application. External candidates who have not identified a primary mentor at an ITM institution should suggest potential faculty mentors in their statement.

Candidates with clinical doctoral degrees other than an MD/DO, such as a PharmD, DNP, or DDS/DMD, should discuss with their department at their home institution about other eligibility criteria that they must meet prior to being appointed (i.e. must they have a particular appointment/position at the institution in order to receive a TL1 fellowship?)

**Additional Eligibility criteria**: All candidates must be U.S. citizens or permanent residents and have completed a professional doctoral degree (MD, DO, PharmD, DNP, DDS/DMD, etc.) or research degree (PhD) at the time of appointment. Students completing a doctoral degree may apply so long as they will have completed all doctoral degree requirements by the TL1 appointment start date. Dual degree recipients such as MD/PhDs are also welcome to apply.

Junior faculty are not eligible to apply.

**Funding**: It is expected that most fellows will complete at least two years of postdoctoral training. Fellows who only need one year of funding because they are already partway through postdoctoral training or have already begun coursework for one of the approved master’s degrees are also welcome to apply.

Fellowships pay a stipend based on NRSA stipend levels for postdoctoral fellows. For MD fellows, the NIH stipend is supplemented by funds from the home department in order to match the fellowship stipend level set by their institution’s GME office and/or section.

The fellowship also provides funds to cover tuition and fees for one of the master’s programs described below and a modest amount of funds to cover training related expenses such as attendance at a national conference, poster printing, software, etc. The fellowship includes funds to offset health insurance expenses for the recipient fellow but does not provide coverage for vision, dental, or the fellow’s family/spouse.

Please note that trainees are allowed a maximum of three years of NRSA support at the postdoctoral level.

All candidates will use the application form found here.
**Master’s Programs Participating in TL1**

Trainees are required to enroll in one of the degree programs below, unless they are otherwise waived out of the requirement (see application instructions). Please note that in addition to applying to the TL1, applicants must also submit a formal application to the master’s program of choice by the deadline in the chart below to facilitate enrollment. If the deadline has already passed for the program to which you are applying, please contact Kelsey Bogue (kbogue@bsd.uchicago.edu) and Absera Melaku (amelaku@bsd.uchicago.edu) to determine if a late application will be possible. If not, we can consider your application for the next application cycle.

Students are highly encouraged to take coursework from other training pathways when the degree program allows it. For example, a clinical research student in MSCP is encouraged to take an elective in informatics and another in public health. Recommended electives will be provided to students when they begin the program.

<table>
<thead>
<tr>
<th>Degree program name and institution</th>
<th>Program description</th>
<th>Deadline</th>
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<tbody>
<tr>
<td><strong>Clinical Research Pathway</strong></td>
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<tr>
<td>UChicago’s Master of Science in Public Health Sciences for Clinical Professionals (MSCP) program</td>
<td>MSCP is offered by the Department of Public Health Sciences in the Biological Sciences Division (BSD) at UChicago and is designed to provide individuals who already have doctoral-level expertise in medicine and other clinical disciplines with training in the theory, methods, and concepts of biostatistics, epidemiology, and health services research needed to design and carry out clinical epidemiology and health services research programs.</td>
<td>March 15- late applications until April 15 if space permits</td>
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<tr>
<td>Rush’s Master of Science in Clinical Research (MSCR) program</td>
<td>MSCR is delivered by the Graduate College at Rush and is designed to train health care professionals – including those with advanced degrees in medicine, research, pharmacy, and nursing – to undertake and evaluate clinical re-search. Training covers experimental design, epidemiology, outcomes research, and clinical pharmacology re-search.</td>
<td>June 30</td>
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<tr>
<td>Loyola’s Master of Science in Clinical Research Methods and Epidemiology (CRME) program</td>
<td>CRME is delivered by the Parkinson School, was designed to educate and train clinical professionals to critically examine and design clinical research to address health disparities and promote equity. It provides clinicians and other health care professionals with training in epidemiology, biostatistics, research design, clinical trials, grant writing and the responsible conduct of research. Courses are online in the evening to accommodate working professionals.</td>
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<td>Loyola’s Master of Science in Implementation Science (MSIS) program</td>
<td>MSIS is delivered by the Parkinson School. The goal of the program is to train students to design and implement evidence-based programs, understand how to analyze outcomes and drive change, identify facilitators and barriers to change, and disseminate evidence-based findings and programs to reach key stakeholders.</td>
<td>July 15</td>
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<td><strong>Biomedical Informatics Pathway</strong></td>
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<td>UChicago’s Master of Science in Biomedical Informatics (MScBMI)</td>
<td>MScBMI is delivered by UChicago’s Graham School of Continuing Liberal and Professional Studies. The goal of the MScBMI program is to equip students with the necessary knowledge and technical skills to tackle everyday data management issues and to guide large informatics projects in clinical and research settings.</td>
<td>June 1</td>
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<tr>
<td>Loyola’s Master of Science in Health Informatics (MSHI) program</td>
<td>MSHI is delivered by the Parkinson School. The program trains students to analyze problems, assess solutions against specific measures, and generate new bodies of knowledge from initial data, while understanding the ethical considerations of data usage, specifically as they relate to patient safety and privacy.</td>
<td>July 15</td>
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<td><strong>Public Health Pathway</strong></td>
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<td>UChicago’s Master of Public Health (MPH) program</td>
<td>The MPH is offered by the Department of Public Health Sciences in the Biological Sciences Division. The new MPH program has been designed to meet the public health competencies required for accreditation, including the foundations of public health, health behavior theory, health communication, biostatistics, epidemiology, health policy, social inequities in health, and public health</td>
<td>March 15 – late applications until April 15</td>
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program planning, implementation, and evaluation. Health equity is fundamental to public health. 

| Loyola’s Master of Public Health (MPH) program | The MPH is delivered by the Parkinson School and trains students with public health competencies in quantitative and qualitative data collection, evidence-based approaches, public health and health care systems, planning and management, policy, leadership, communication, interprofessional practice, and systems thinking. The program can be completed in person, online, or in a hybrid format. if space permits May 15 |

Program Activities

1. Participate in research and/or research training activities full-time, although MD fellows may continue to do some limited clinical work (~20% time) during their appointment.

2. Trainees will select a primary training pathway: Clinical Research, Biomedical Informatics, or Public Health. Depending on the selected training pathway, the trainee will enroll in one of the approved master’s programs, described above. In most cases, coursework will be completed over two years. Trainees who wish to waive out of particular courses or degree requirements because they have prior training in these areas should describe their prior training experience in the application and suggest an alternative plan for coursework/training. After receiving conditional acceptance to the TL1 program, trainees will be required to apply separately to the selected master’s program in a timely manner, if not already enrolled. Trainees are strongly encouraged to take elective courses, when possible, in the other tracks.

3. Trainee will identify and work with a primary mentor in his/her research field at any ITM institution to conduct a mentored research project. Please note that an appropriate research mentor does not need to be from the trainee’s clinical discipline. Appropriate primary mentors include mid or senior level faculty with a track record of publications, grant funding, and mentoring. Trainee and primary mentor will work together to establish an interdisciplinary mentorship team that may include mentors from across the ITM.

4. As the aim of the TL1 is to enhance trainees’ potential to develop into productive, independent researchers in clinical and translational science, it is highly encouraged that with the support of their faculty mentor, trainees apply for an F32 postdoctoral Individual National Research Service Award or another individual award at an appropriate time during their appointment period. Plans for any such applications should be described in the TL1 proposal.

5. All trainees, regardless of institution will attend regularly and present once per appointment year in the Outcomes Research Workshop (ORW), which occurs weekly on Wednesdays from 8:30-9:30 and will take place over zoom. In lieu of ORW once per month, the TL1 program will hold a TL1 check in with fellows and faculty.

6. Most trainees will be expected to participate in the Summer Program in Outcomes Research Training (SPORT) in part or in full, depending on prior training and the trainee’s master’s coursework. Hybrid participation will be possible for fellows based outside UChicago and payment will be covered by the TL1.

7. Trainees must participate in a writing workshop. Some writing workshops are built into the existing master’s programs, like the MSCR program at Rush. Options at UChicago include the summer Research Proposal Development Workshop that is a part of SPORT, the Career Award Writing Workshop, or ENGL 13000/33000 Academic and Professional Writing, a credit course offered through the English Department that may be available as an elective in some programs.

8. Trainees attend the annual Association for Clinical and Translational Science (ACTS) conference once per appointment year. Fellows who have completed at least one year of prior postdoctoral
training are required to submit an abstract. Funds will be provided through the grant to support travel to this conference.

9. Participate in ITM programming approximately once per quarter by attending the ITM TRIO studio, the ITM Grand Rounds, and/or the Community Grand Rounds. More information about these activities will be provided at the start of the fellowship.

10. Team Science Online Learning Modules: Trainees must complete four modules found here.

11. Training in the Responsible Conduct of Research: All trainees must complete in person RCR training during postdoctoral research training. Two examples of approved RCR training include the ITM's RCR summer course and the Essentials of Patient Oriented Research winter course. Trainees must also complete two online trainings:
   a. CITI training in Human Subjects Protection
   b. Good Clinical Practice training through NIH

Reporting requirements

1. Trainees must submit quarterly learning plans to TL1 administrator. Trainees must review and obtain comments from their primary mentor at the bottom of the form.

2. Trainees must abide by all NIH/NRSA reporting requirements including reporting funding on all publications and presentations and submitting all journal articles to the PubMed Central database in accordance with the NIH public access policy.

3. At the start of the first year of the TL1 appointment, trainees must sign an NIH payback service agreement, which states that “Postdoctoral Kirschstein-NRSA recipients will incur a payback obligation only during the initial 12 months of the postdoctoral Kirschstein-NRSA support” and that the fellow agrees to engage in 12 months of health-related research, health-related research training, or health-related teaching after completion of the first 12 months of postdoctoral NRSA support. More information on the payback agreement can be found here.

4. While in the program trainees agree to submit information as needed to the program administrator on an annual basis for progress reports and future renewal applications. Trainees agree to complete all necessary paperwork in a prompt and timely manner.

5. Trainees must complete an annual TL1 alumni survey and provide the training program administrator an updated CV, as requested, once per year after completing the program for program evaluation purposes.

Application

Applications are currently being accepted for a start date in summer or fall 2022, as early as July 2022.

To be reviewed in the first round of applications, please submit an application by June 8, 2022. We may have spots remaining after this date, so contact the program team if you plan on submitting an application after this date.

We are accepting applications from:

- Candidates requesting two years of support for postdoctoral training.
- Candidates requesting one year of support for postdoctoral training who have already completed 1 or more years of postdoctoral research training. Fellows requesting only one year of support who have not already started one of the approved master’s degree program will be
expected to complete all coursework within one year. (Note: the UChicago MPH requires more than one year of coursework.)

Applications will start being reviewed in June 2022 and will continue being accepted until all positions are filled. Please also note the deadline for each of the approved master’s degrees listed below. **You must also apply to the master’s degree separately to facilitate enrollment by the appropriate deadline.** If the deadline has passed, you may contact the program team to discuss options or may submit your application for consideration in 2023.

You may contact the program team to confirm if there are still positions available before you apply.

Candidates must submit their materials through the [online form found here](#).

Application materials include:

1. CV
2. Personal statement describing career goals, research interests, and how the training program will help the candidate reach these goals. Maximum of 1800 words.
   a. Applicants may also describe how prior coursework may be duplicative of training in chosen master’s degree and request a waiver for these courses.
   b. Applicants should describe how their research goals already align with the ITM and TL1’s goal of advancing health equity, and/or how TL1 training will help the trainee align their research with these goals.
   c. External candidates who do not yet have a primary mentor at an ITM institution should also list faculty with whom they are interested in working.
   d. Plans for any F32 or individual awards should be described in the personal statement.
3. Two letters of recommendation. One letter should be from the trainee’s proposed primary mentor (if applying internally from an ITM institution). This letter should include a justification of why the faculty member is an appropriate research mentor for the candidate, including a description of the mentor’s record of publications, grant funding, and mentoring. At least one of the other two letters should be from a faculty who can speak to the candidate’s ability or promise in clinical and/or translational research.
4. Undergraduate and graduate (PhD, MD, etc.) transcripts. Unofficial transcripts are preferred at this stage for application processing and should be uploaded directly to the application system. Official transcripts may be requested at a later date.
5. Letter of commitment from unit leader (fellowship director, section chief, or department chair) who is able to attest to institutional commitment for candidate (MDs only): This letter should include the following commitments: 1). The section/department will take necessary steps to transition fellow to an Advanced Clinical Fellow position by the start date of the TL1 appointment; 2). The section/department will cover the difference between the stipend provided by the TL1 grant, allocated according to years of experience, and the fellow’s stipend level set by the GME office; and 3). If awarded the TL1, the fellow will have 80% protected time during the appointment period for research and training activities.
6. Job market paper and/or first author publications (required for PhD candidates; optional for MDs): All PhD applicants must submit a job market paper and/or other first author publications. Candidates may submit up to three papers in their application, combined as one PDF. MD applicants are welcome to submit writing samples but this is not required.
Applications will be reviewed by the TL1 program directors and steering committee. Candidates in consideration for a fellowship position will be invited to interview, either in person or over the phone.

Contact
Please contact Kelsey Bogue at kbogue@bsd.uchicago.edu and Absera Melaku at amelaku@bsd.uchicago.edu with any questions about the TL1 program.