**Health Services, Outcomes, and Effectiveness Research Training Program**

**University of Alabama at Birmingham**

**¯ 2021 AHRQ NRSA T32 Postdoctoral Fellowship Application Instructions ¯**

**I. OVERVIEW**

The Health Services, Outcomes, and Effectiveness Research (HSOER) Training Program at UAB is a mentored research training program in health services & outcomes research (*Mike Mugavero, MD, MHSc, PD/PI*). **Until 5:00 PM CST, January 15, 2021**, the program will be accepting applications for open postdoctoral positions with a start date of July 2021 which will last 2 years. These are full-time mentored research training fellowships supported by the Agency for Healthcare Research and Quality (AHRQ) through Institutional (T32) National Research Training Awards (NRSA).

Our research and training base includes mentors and trainees across UAB Schools and Departments including Medicine, Public Health, Health Professions, Nursing, Dentistry, Business, and College of Arts and Sciences.

**Program Content Areas:**

• Healthcare Efficiency and Disparities

• Healthcare Quality Measurement & Improvement

• Patient-Centered Outcomes Research

• Comparative Effectiveness Research

• Pharmacoepidemiology & Patient Safety

• Translating Research Evidence into Practice & Policy

• Economic Evaluation & Decision Analytic Modeling

• Health Informatics

• Implementation & dissemination science

The training program prepares interdisciplinary investigators to pursue careers in health services & outcomes research. Skills development will include exposure to relevant epidemiological, statistical, experimental, mixed methods, and quasi- experimental methodologies, analysis of large data sets, health outcomes assessment, and economic evaluation, all with an emphasis on the practical application of outcomes research methodology.

**Benefits of the Program:**

Protected Time for Mentored Research Training. Annual NRSA stipend for full-time multidisciplinary mentored research training. Multidisciplinary mentored research training is the backbone of this training program and fundamental to successful career development in health services, outcomes, and effectiveness research. Trainees will be expected to propose a team of at least two experienced mentors. An excellent pool of health services, outcomes, and effectiveness research mentors has been identified and these mentors are available to the program (**See COERE website for list**).

Tuition Support for Didactic Training. The program provides tuition support (up to $6,178 per year) through degree and non-degree track training for HSOER through relevant programs and certificates. Trainees are encouraged to enroll in courses to address specific training goals tailored to their background, experience, career objectives and interests. Trainees without an existing masters of science in public health (MSPH) or comparable degree may obtain a master’s degree certificate through one of the recommended programs/tracks. Trainees with an existing MSPH or comparable degree will be encouraged to consider courses within these programs to supplement core skills and learn new methodologies.

Recommended didactic training programs. The UAB School of Public Health offers MSPH programs in Outcomes Research, Applied Epidemiology, and Biostatistics. These are research-focused degree programs that include methods training and conclude with a thesis project.

The UAB School of Health Professions offers Masters of Science in Health Informatics and Masters of Science in Healthcare Quality and Safety, as well as a graduate certificates in Healthcare Quality and Safety and Mixed Methods Research.

Other didactic training programs may be approved in consultation with the T32 program leadership and the mentoring team.

Training Related Expenses (TREs). Health insurance, travel stipend, and possibility of additional funds for training related expenses.

**II. ELIGIBILITY**

***Candidates must be U.S. citizens, non-citizen nationals, or have permanent residency status.*** Eligible applicants will have earned a clinical or research doctorate, including PhD, ScD, DrPH, MD, DO, DC, ND, DDS, DMD, DNS or equivalent doctoral degree. Candidates must demonstrate a commitment to mentored research training and career development in health services, outcomes and effectiveness research. For clinicians, the program may be coordinated with a current residency program or clinical fellowship and will allow for some minimum time allocated to clinical activities that are conducted outside the 40 hours per week required for full-time research training.

**III. APPLICATION PROCESS**

Please follow the application instructions described below. The attachments referenced above are designed to assist you in drafting your application.

1) **Letter of Interest (LOI).** Please include a letter of interest (maximum 2 pages *not* including references) addressing the following:

A) Discuss your interest in training in outcomes and effectiveness research at this time in your career development and summarize any relevant background and previous training. Describe the specific research focus or project that you wish to pursue during your fellowship.

B) Briefly discuss your goals for research training and career development, including coursework or degree attainment.

C) T32 Applicants should describe your research plan with your primary mentor. If you have identified co-mentors, please discuss how they will work with you to attain your research and career development goals. You do not have to have a co-mentor(s) pre-identified to apply; however, please review the list of our primary HSOER mentoring pool (**See COERE website for list**) and propose one or more co-mentor(s) that you would like the opportunity to work with.

2) **Curriculum Vitae (CV).**

3) **Letters of recommendation.** Please provide 2 letters of recommendation. One should be from your primary mentor and should describe their plan for your training and development. The other should be from faculty you have worked with directly on research or research training-related activities or who have supervised you in your graduate training. Faculty providing letters of recommendation should be collected by the applicant and included in the application packet.

**IV. IMPORTANT DATES**

**January 15, 2021, 5:00 PM CST** – Last day for receipt of applications.

**March** – Anticipated timeline for notification to candidates of selection outcome.

**July 1, 2021** – Fellowship start date.

**V. SUBMISSION OF MATERIALS**

1. Interested applicants will upload their application as **a single PDF document** to:

<https://www.uab.edu/medicine/coere/education/t32-fellowship-in-outcomes-and-effectiveness-research-and-health-services-research>. Please combine in the following order:

1. Letter of Interest (LOI) (maximum 2 pages *not* including references)
2. Curriculum Vitae (CV)
3. Letters of Recommendation

**Contacts:** Letters of interest and of recommendation should be addressed to:

**Michael Mugavero, MD, MHSc**, Professor of Medicine, Program Director

UAB Center for Outcomes and Effectiveness Research and Education

Bevill Biomedical Sciences

BBRB 206H

1720 2nd Ave South

Birmingham, AL 35294-2170

For questions about the application process or the training program, **please contact Jeanne Merchant, Program Manager, at jsmerchant@uabmc.edu or 205-492-9744, Becky Reamey (reamey@uab.edu), or Michael Mugavero (mmugavero@uabmc.edu).**

**USEFUL INFORMATION**

**Definitions of Outcomes Research, Comparative Effectiveness Research, and Patient Centered Outcomes Research**

***What is Outcomes Research?***

**Excerpt from the Agency for Healthcare Quality and Research (AHRQ) Fact Sheet –** Outcomes research seeks to understand the end results of particular health care practices and interventions. End results include effects that people experience and care about, such as change in the ability to function. In particular, for individuals with chronic conditions—where cure is not always possible—end results include quality of life as well as mortality. By linking the care people get to the outcomes they experience, outcomes research has become the key to developing better ways to monitor and improve the quality of care. Supporting improvements in health outcomes is a strategic goal of the Agency for Healthcare Research and Quality (AHRQ, formerly the Agency for Health Care Policy and Research).

*Outcomes Research. Fact* Sheet. AHRQ Publication No. 00-P011, March 2000. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/clinic/outfact.htm>

***What is Comparative Effectiveness Research?***

**Department of Health and Human Services Definition –** HHS Comparative effectiveness research is the conduct and synthesis of research comparing the benefits and harms of different interventions and strategies to prevent, diagnose, treat and monitor health conditions in “real world” settings. The purpose of this research is to improve health outcomes by developing and disseminating evidence-based information to patients, clinicians, and other decision-makers, responding to their expressed needs, about which interventions are most effective for which patients under specific circumstances.

• To provide this information, CER must access a comprehensive array of health-related outcomes for diverse patient populations and sub-groups.

• Defined interventions compared may include medications, procedures, medical and assistive devices and technologies, diagnostic testing, behavioral change, and delivery system strategies.

• This research necessitates the development, expansion, and use of a variety of data sources and methods to access comparative effectiveness and actively disseminate the results.

***What is Patient-Centered Outcomes Research?***

**Patient-Centered Outcomes Research Institute Working Definition –** Patient-Centered Outcomes Research (PCOR) helps people make informed health care decisions and allows their voice to be heard in assessing the value of health care options.

This research answers patient-focused questions:

1. “Given my personal characteristics, conditions and preferences, what should I expect will happen to me?”

2. “What are my options and what are the potential benefits and harms of those options?”

3. “What can I do to improve the outcomes that are most important to me?”

4. “How can clinicians and the care delivery systems they work in help me make the best decisions about my health and healthcare?”

To answer these questions, PCOR:

* Assesses the benefits and harms of preventive, diagnostic, therapeutic, palliative, or health delivery system interventions to inform decision making, highlighting comparisons and outcomes that matter to people;
* Is inclusive of an individual’s preferences, autonomy and needs, focusing on outcomes that people notice and care about such as survival, function, symptoms, and health related quality of life;
* Incorporates a wide variety of settings and diversity of participants to address individual differences and barriers to implementation and dissemination; and
* Investigates (or may investigate) optimizing outcomes while addressing burden to individuals, availability of services, technology, and personnel, and other stakeholder perspectives.

For a more information on PCOR, go to the Patient-Centered Outcomes Research Institute (PCORI) website at <http://www.pcori.org/>.