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Presenter: Becky Yano

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Molly: We have Dr. Elizabeth Yano presenting for us today and she’s a Director of the VA HSR&D Center for the Study of Healthcare Innovation, Implementation and Policy, also the Director of the VA Women’s health CREATE and Director of VA Women’s Health Research Network Consortium and a Professor of Health Policy and Management and UCLA Fielding School of Public Health.

Dr. Elizabeth Yano: Well thank you so much. We are looking forward to providing you some additional strategies today for the development of mentoring plans for career development award applicants. We wanted to start off though with a couple of poll questions so Molly is going to help us with that.

Molly: Thank you. So for our attendees you have up on your screen the first poll question and we want to get an idea of have you already identified a primary mentor for your planned CDA application? Yes, No, Maybe or I am a prospective CDA mentor. It looks like we’ve got a nice responsive audience. We’re already had over 85% vote so that’s great. It gives us an idea of how to gear the talk. Okay. We are approaching 90% and I see a pretty clear trend so I will go ahead and close that out and share those results. So just under half of our audience 48% have identified a primary mentor, about 24% say no, 20% maybe and 8% are prospective CDA mentors. So thank you for that. Becky, can we just jump into the next poll?

Dr. Elizabeth Yano: Yes, please.

Molly: Excellent. So for the next poll do you anticipate having to reach out to engage a “distance mentor” for instance a mentor at another VA or nonaffiliated university? Yes, No, Maybe or Don’t Know. So just click the circle next to your reply. Okay, it looks like we’ve got about 80% response rate so I’m just going to close this out and share those results. It looks like we have 58% replying yes, 23% no, 8% maybe and 12% don’t know. So thank you again to those respondents. Dr. Yano, I am going to turn the screenshare over to you now.

Dr. Elizabeth Yano: Thank you so much. Last time we focused on strategies for the development of career plans for prospective CDA applicants and talked a lot about the importance of the career plan as an independent portion of the application and being as important as the research plans since these in face are not just investigator initiated research grants but in fact are investing in you as a young investigator getting your career launched.

This time we are going to focus on identifications of mentors and the mentoring plan portion of all of this work. Just a reminder of the CDA evaluation criteria are the nominee’s profession and background and productivity, the appropriateness of the research and training plans presented. We talked a lot about that last time. Then the suitability of the proposed mentors in relationship to the nominee’s goals which is why we are focusing an entire session on that today. We will talk about relevance of planned research to VA, feasibility and merit of the planned research and long-term contribution.

A lot of this work also began with a proposal workshop that was done by Dr. Paul Shekelle and Rob Small who is the head of the HSR&D CDA program back in October of 2014. I just wanted for continuity sake also remind you what they said about finding a mentor. They said to remind prospective applicants that finding a mentor is the very first step to take. The applicants at COIN at HSR&D centers have had an advantage in this regard, that the degree of institutional support can make a difference also at non HSD&D sites with facility directors and associates chief of staff for research. They noted that most CDAs have three to four formal mentors. They can tell you biomedical laboratory and clinical would typically have a single primary mentor. So your research service may actually as an aside question sometimes you as to why you have a gaggle of mentors but it is in fact a traditional approach in health services research really as a team science oriented field. At least one of those must be on site at the VA and preferably the primary. That was their feedback at the time. I don’t think I have ever seen a CDA get funded whose primary mentor was not onsite, just as a kind of reality check. Because that person provides you with a lot of protection in terms of space and equipment and integration with the local facility as well as getting you access to other resources which is why it is so important. They reminded everyone that HSD&D has no matchmaking service for mentoring.

I wanted to let you know there is an exception at least in the Women’s Health Research Network where we actually do connect people with content. I’m sure those of you who are in centers of innovation or other kinds of centers like PADRECC, GRECC, MIRECC and the like, likely have \_\_\_\_\_ [00:05:36] leadership and mentors locally who have broad professional networks to hook you up with folks as needed.

Let me get right into the instructions in the CDA plan around the mentoring plan. This is only three pages but it is a very important three pages. I guess I will be a broken record on that one. Each portion of this is an organic and important piece of a whole. First you have to identify all mentors, consultants and collaborators involved with the proposed research and career development program. You have to briefly describe their roles, anticipated contributions, and interactions with respect to the career development plan. We are going to go into examples. Then describe the respective areas of expertise and how they will be combined and coordinated to enhance your career development.

The reason I bother going over these instructions because you can obviously review them yourselves is because it is not uncommon for people to list some amazing experts in their mentorship plan but not necessarily link them to their research plan. Or not make it clear enough what each person’s respective role is, how much time they are going to spend with you and how they are going to actually mentor you. Each element of this becomes important to consider as you think about the group of people that you are going to work with.

Identification of mentors is also important because at least your primary mentor should be an associate professor level or higher. I would say an assistant professor as a primary mentor will generally be seen as too junior with not enough of a track record in this regard. If you have no other option locally but an assistant professor, you are going to have to find a way to make an extremely strong case why that person is at a stage of their career to be really ready to guide you through really your being an assistant professor level. Sometimes it is better, and again we will go through some examples, to have someone who is not necessarily related to your specific area of interest who is at a higher level who has a demonstrated track record of mentorship. Then engage this other person as part of your mentoring team as well.

It is also best if the mentor has in fact had CDA mentoring track record before, but of course, everyone’s gotta start somewhere. I will never forget a letter from a former career development awardee himself who was finally submitting CDA for the first time for one of his mentees. He put together a beautiful letter talking about how he’s always looked forward to mentoring, that this is now his opportunity to give back and build a community of young investigators in this area of his expertise demonstrating a course that this person would have an independent career but the level of excitement about taking on this role was just very evident in a very well written letter of support. Now that said, this former CDA was already also at the associate professor level. So if you’re a mentor or your mentor is taking on your as a CDA for the first time, you may want to speak to that person’s ability, readiness and the like to take that role. So what you need to be thinking about is what is your prospective mentor’s track record of mentorship so far. It may be CDAs. It may be fellows. It may be others. Maybe it’s grad students. And to be able to speak on some level to the success rate. The letters that your mentors write often include a table or other summary of how well other mentees have landed professionally. I actually now include that in my CVs so that I can keep track of where people landed and so I can speak to these issues, any letters that I write.

Now if again the person has had no track record mentoring, that mentor has to make the case that they are ready, understands the work and the commitment that’s required and has connections needed to help you succeed. That will be very important.

The primary mentor is also typically someone with a significant VA HSD&D and/or QUERI track record of funding that shows that they know how to successfully develop and get VA grants funded and knows the VA healthcare system. This becomes really important. We’ve had several CDA applicants where their primary mentor along their path to date has really been a strong clinician leader for example or an operations leader. There is no reason to divorce that person from your mentorship but what you are going into with the CDA is the expectation that you are going to be able to get HSD&D funding and create a long-term career. Otherwise you could perhaps get some other kind of mentorship or training along the way. In those cases, we sometimes will have an established HSD&D investigator be a co-primary mentor with someone who is more operations oriented so that the committee sees that you will have somebody who knows how to get these things and can help really move you along.

As I mentioned, the primary mentor is typically at your VA providing links to local and institutional resources, capable of negotiating on your behalf. That is especially true I think for clinicians. Most VAs are being much more rigorous about their application of the mitigations for clinical times, meaning you are a clinician first and you have to get protected time thereafter based on your PI-ship of grants, your achievement of a career development award, perhaps your leadership of an IRB or something like that. Depending upon what it is you’re focusing on, you may need someone at your institution negotiating with the chief of staff or the facility director to make sure you get the time you need to even write your CDA or conduct the work thereafter.

As I alluded to, the primary mentor does not actually have to be an expert in your research area but should be completely committed to your career successes and that should be evident in the letter and the time spent in reviewing and helping you refine your application. You should also be able to demonstrate collaboration and/or connection with your primary and/or other mentors. One example is coauthored papers or other forms of collaboration. There has to be evidence of commitment to the applicant and evidence of engagement in writing the letter of intent and the application itself.

I think there have been some circumstances in many university based K-awards and other programs where the awardee or the applicant really does a pretty significantly independent job of putting the application together and my sense of CDA applications in the many years of being on the review committee is that we really expect in the VA much more so that the mentors are not necessarily that hands off and that they in fact have made sure that the quality of your application, its logical flow, the pieces sticking together really become a reflection of how well people in your local environment or your mentors if they are not local as well, have spent giving you feedback on multiple drafts. It can be very apparent that somebody more experienced hasn’t necessarily given you that feedback when the applications go through. That becomes pretty important for mentors to realize as well.

The primary mentor letter in particular needs to demonstrate the reasons and where possible, evidence of that commitment. It is important for you to know that these are not one to two page letters. I have seen drafts of letters of recommendation and letters from primary mentors that have been quite short and sweet. They might have been beautifully crafted but they don’t necessarily reflect the mentor’s knowledge of the applicant and their qualifications, how that applicant fits into the organization and the research focused areas perhaps, their assessment of that person’s promise, their ability to describe their own qualifications as a mentor and the other people that they have mentored. You can tell from that kind of content that is not a one to two-page letter. I have seen one mentor letter where the mentor wrote an entirely beautiful four or five-page letter but it was about himself and not about the applicant. So that was too far discussing the qualifications of the mentor and didn’t demonstrate any clear commitment to that mentee or clear knowledge of how that person’s growth would benefit from the CDA for example.

Other research services as I mentioned before may rely on a single mentor. I can’t remember the last application I have seen where a CDA from HSD&D had just one. We are a team sport. Your research plans likely span a range of methods, disciplines and areas of expertise. It is not uncommon for you to let’s say propose a qualitative area of work and if your primary mentor doesn’t have that area of expertise, you may take a course in qualitative methods but it is often very good to be able to point to who is going to answer your questions when you actually try and apply those methods the first time. If it is going back to the course instruction, that might work but they will want to know who is going to guide you when you actually try these things in real practice. That is something to think about in terms of potentially content mentors in some areas.

You need to identify your mentors, consultants and collaborators whose roles map to your research and career plans throughout. Just make sure that that network and web and activities is very clear.

Types of additional mentors and others will vary depending on several factors. One is the type of applicant you are. If you’re an M.D. or a PhD, you may be wanting to link to people who are disciplinary leaders perhaps even in your academic department. It may be that you are part of a GRECC, Geriatric Research Education and Clinical Center, and it may be that you want to involve the GRECC leadership in your mentorship team or in a mentoring advisory group or something like that because you want those people to stay engaged in your career development and continue to help you navigate any local VA issues. Or you may really want to have a role in that GRECC later on, for example. Think about what is necessary for your professional development and academic development on top of your research and career development.

It may also be dependant upon methods involved in the research plan. If you include qualitative aims as I mentioned, who will mentor you in those actual areas of methods? If you’re focused on some sophisticated analysis, who is going to troubleshoot problems with you? We know there are all kinds of problems trying to figure out how to navigate \_\_\_\_\_ [00:16:56] and the corporate data warehouse data, those data sets don’t come down easily. They don’t come down in nice, clean little rectangular data sets for you. It takes a lot of work so you have to demonstrate who’s got the experience to help you wind your way through that so that you’re not still trying to chew on data five years into your plan. If you’re going to do a new study design, who on your team has experience with that or is there someone at the university who is going to pitch hit for you on working through issues of hybrid type 3 designs or something like that? If any time you are involving a novel method, who is going to be your anchor in that work and will guide you?

Can you have too many mentors? I get asked this question a lot. And I say yes. The committee will get concerned if you’re at the center of too large a cast of characters. You run the risk of spending too much time managing people and not doing your research and getting your training. I don’t really have any fixed set of numbers. It is one additional reason why I think having solid, senior mentorship with a lot of experience helps. They can guide you in that. At least this person can run interference and help you prioritize the input of several mentors and they should be in a position to help you negotiate disagreements in approach or plan.

Bottom line is again every mentor, consultant or collaborator must have an identifiable role. Even if it means you dial them in and out for something. Let’s say your second aim is qualitative. You may dial in a medical anthropologist for that portion who you may not need to meet with very often once you go into intervention development or maybe that person helps you with intervention development but when you finally get into implementing a practice intervention, that person may dial back out. If your practice intervention pilot requires key stakeholder interviews, then you may want to specify that this person is going to help mentor you through the original qualitative interviews that helped you develop the practice intervention and is going to help teach you how to do key stakeholder interviews, to help evaluate the intervention effectiveness as well. Just thinking about who you need when is very key.

Can you have too few? Also yes. One person cannot be all things to all people. Two to three mentors are okay but then you need to clarify the resources and the environment and how readily you may be able to access those folks. Do they already have a commitment to you? All these folks will have to write letters that demonstrate what it is they are going to do and how they are going to accomplish it with you.

It is possible that your training plan may be sufficient for some skill building. Again, a course professor may become a link to a method and that is perfectly fine. This will be different for each one of your applications. I am providing some general overview but how you drill down will depend upon your topic area, the kinds of projects that are within your research plan and the kind of operational partners that you may be plugging into as well.

Are distance mentors okay? Again, yes. Again the primary should be at your location but not every VA or Center has access to every kind of expertise. It is quite possible that distance mentors may be necessary. The best bet is to demonstrate a history of successful collaboration from a distance because that adds credibility. I get asked this quite a bit and one of the issues in this is how do you demonstrate that successful collaboration? Sometimes it is coauthored papers, sometimes it is the development of a collaborative project. We often talk about how often we actually communicate. Perhaps we have had folks actually fly to another center of innovation to meet with a mentee or maybe they meet at Academy Health or the Society for General Internal Medicine or some such. But talking about how you are managing to make a distance relationship work is important.

You may also want to clarify the approach for maintaining the quality. Now we have done this sometimes and sometimes the committee still doesn’t quite buy it. I have people that I distance mentor all over the place and for one of our folks we have probably 10 e-mails a week. We have met in person. I have flown to their center a few times for other projects or for the expressed purpose of meeting with this mentee in person. We have done video conferences and we have coauthored half a dozen papers and met at Academy Hill and for the committee to then say well, you know distance stuff, we’re not so sure. In all honesty, we kind of throw up our hands. This person, we know each other’ families by now. The person did ultimately get funded even though we were at a distance. I think it also may relate to how well the committee members themselves have had experiences with distance mentorship. You can just do the best you can on that.

If though there are too many distance mentors, it gets to that same concern about the CDA having to do too much work to organize a cast of characters. There are of course very real concerns about out of sight, out of mind. There’s great synergy to being able to walk down the hall and see someone and say oh by the way, I have been meaning to ask you A, B and C and you go into their office and you solve some problem. I mean everyone does know that in person is optimal. If you are too spread, that does raise concerns. It will depend upon the topical areas that you have and the concordance of your research interests probably within your own COIN. You will just have to kind of work that part through.

I wanted to give just a few examples. One of them, Candidate #1 here was focused on women’s health access and her primary mentor was a VA-based physician who was a professor of medicine and head a general internal medicine but had absolutely zero background in access to care and zero background in women’s health. But he had a tremendous background and track record for successful mentorship. He just simply knew how to mentor people. He had mentored people from a wide set of backgrounds, different topical areas but his mentees had all been pretty wildly successful. Her secondary was a university-based expert on vulnerable populations, because many women veterans who are seen in the VA have significant and complex physical and mental health needs and then her tertiary person was a VA-based content expert, which I’ll talk about a little bit more later on. No, it was added later on in this case, sorry. This is someone who was funded for a career development award with no problem. It was a physician-based awardee.

Another example of someone whose focus was on falls prevention. His primary mentor was the same person for the women’s health access one. This was again a general internist who was focused on other areas not in geriatrics. This was a geriatrician candidate. The secondary mentor was a VA-based geriatrician health services researcher. So that was the link to the discipline and that person’s both folks, primary and secondary, had established HSD&D funding track records. Then this person put together something that at the time was novel but I think more people are using this if it fits their model and that was an advisory board that met intermittently, maybe quarterly at first, maybe every six months or so later on that included a series of consulting mentors who met as a group. That included this person’s GRECC leadership, their university leaders in geriatrics, statistical consultants, a link to our center of innovation. It provided him easy access to key expertise and the program heads for his ongoing professional development but it meant that he really was only working with two mentors and this other group of experts as needed. Instead of him being the hub of 20 people, he was really cared for, mentored by these two folks and had a very nice structured way of integrating other people. So that notion of a cast a characters did not come up. He too was successful in his bid for a CDA.

Third candidate here focused on women’s health equity and had a primary mentor who was VA-based and also a physician and was a Center director, a HSD&D Center director but again had no content expertise in the area of women’s health, did have expertise in equity, however, had a co-primary that was VA-based content expert from a distance and this person had the women’s health expertise, had a secondary local university-based content mentor. So it was a non VA women’s health expert. Then had a tertiary person who was a nationally recognized content expert in women’s health and equity as well. This person was successful. I am again showing you examples of the mix and match that fit the person’s needs.

The fourth candidate focused on nursing and hospital quality and also had a VA-based Center director as a mentor. In this case this person had a history of relevant content but the candidate was PhD RN and the primary mentor was an M.D. That did not raise concerns with the committee. In fact, given the history of relevant content, this particular Center director literally said that she had been looking for 20 years for somebody with this person’s training because this person’s research had shown the importance of nursing roles in hospital quality and outpatient quality. There was a synergy and salience there. The secondary mentor was also VA-based. It was a Center leader with a history of mentoring candidates including this person during their post-doc so there was a post-doc link and two tertiary mentors. One was a university-based expert in nursing quality and a VA-based expert in implementation science and nursing. You can see how people put together some of these mentoring teams.

Another example of someone who focused on women veterans and substance use disorder care. Primary was a VA-Center leader with women’s health expertise but zero expertise in SUD. We brought together a secondary mentor who was actually the director of the substance use disorder QUERI at the time but that was requiring a distance mentorship and then got a co-secondary who was a methods expert as another local mentor because this person had no expertise in qualitative methods and was proposing a project in the research plan that was really going to require some hands-on work. This person, this quality of methods expert, also had a history of work in SUDs so it became a very supportive team.

Another candidate was in smoking cessation. Her primary was a VA-based smoking cessation expert with a really strong HSD&D track record and also had an existing track record with the candidate who had worked as a project director on his studies before going after a CDA. This person had a co-primary implementation expert with an existing track record with the candidate as well. You can see in this case, this is a fairly, I don’t want to say shallow because that’s not representative of the people but there is not a depth of four or five folks who worked on this person’s CDA. In all fairness this is an older CDA applicant, I don’t mean the age of the person. I mean the person was funded some years ago. I have seen quite a complex mix of plans with the focus being again that there is no fixed formula. It is what makes sense for your application.

This is another example of an operations relevant one and this is someone focused on care of veterans with complex physical health conditions, mental health and substance use disorders. So gosh you could have a lot of mentors in a mix like this. In this case the primary is a primary care M.D. with significant HSD&D and QUERI track records. Co-primary being a psychiatrist and an implementation scientist. That’s the person that brings the mental health and SUDs part in. They have a secondary health care epidemiologist also with implementation expertise, a content mentor anthropologist. In this case because the work has been and is continuing to be very hooked into to operations, they actually have consulting mentors of a national PACT and Primary Care and Mental Health Integration leadership. Some people may have an increasing mix like this given the blueprint for excellence and the focus on partnered work. I just wanted to give you that as an additional example.

If I haven’t said it enough times, there is no fixed right formula. You’ve got to put together the best team for you, your career plan and your research plan. Still that said, you want to be able to subject that to review and scrutiny by others before you submit. So that other people can give you input if in fact there is someone else who might be very good to include or if perhaps they even know that two of the folks you’d like to put together don’t fit well in the room together. I’ve had that happen and it can make mentoring a little difficult. You need to make sure that the group of people also gel for you.

Plan well in advance because no one likes being asked to be someone’s mentor at the 11th hour. It shows poorly both for the applicant and for the mentor of that applicant. If someone is say oh, you know it’s due next week, I’ll write the letter for you but will you fill this hole for me. People may still do it for you, but it’s not good form. It’s not good grantsmanship either. So remember that someone who is taking mentorship seriously will want to read your application, provide you feedback. They need time to write a good letter. Doing things last minute like that isn’t good which is why else this needs to be one of your first tasks.

The sections of the application for the mentoring plan talk about roles, contributions and interactions. I’m going to talk about each one of those. The roles will vary. There is overall mentorship and guidance and troubleshooting in the broad spectrum of what it takes to be a VA researcher. There is content mentorship. Whether that is disciplinary expertise, methodologic experience and expertise that you may to build in. There are the academic links, your support for promotion. The person that gets you access to needed courses and other resources. VA career development awards do not come with tuition support. So you need to have thought through who on the academic side or on the VA side is going to negotiate to either get you audited courses or going to somehow pay for you to attend and get the training that you need. You may need department and service links for position continuity, for access to clinical settings for research conduct. Some of those roles may not be mentoring roles. They may be just a letter of support from someone that says we agree with the importance of this work and we are going to give this person access to our primary care clinics. That’s fine too. It doesn’t have to require a mentoring role necessarily. Then there are as I mentioned increased focus on program partners. Whether they are at your VA medical center, your VISN or in a national program office.

Now contributions are an opportunity for you to be specific about what each mentor is going to be able to do for you. Maybe it is including access to data. Maybe they’ve got the world’s best cohort on something and your first project is going to be a secondary analysis, a spinoff of their work. Maybe it’s an ability to spin off of more than just data from an existing project but you’re going to adapt an intervention of someone’s and you want that person’s consultation during your adaptation of their project or their intervention in a new population or in a different kind of setting. It could include unique expertise and insights on a particular project or a theoretical framework for the entire CDA application. There are wonderful people at Ann Arbor, for example, who are leading experts in CFIR, Consolidated Framework for Implementation Research or maybe someone is a great expert on diffusion of innovation theory or there is some new theory that you’re applying in a novel way and the guru on care coordination is at Harvard or something like that. All that’s fine. You want to be able to speak to what those people’s contributions specifically are to your application.

That may mean ignoring that they are a guru in some other area which is lovely but it doesn’t relate to your CDA. You don’t have to spend a lot of time and you won’t have a lot of space to wax on about all their amazing expertise and contributions. You want to hunker down and focus on what they are doing for your application and your plan. You may be able to include resources from a center, from your VA medical center, your VISN, your affiliate or a program office and central office on what exactly else they are going to do for you in addition to perhaps intellectual input. That’s always a plus if folks are saying yes, we are so committed to this applicant that we are going to give them A, B & C.

For interactions again, you need to talk about the time that you’re going to spend with them. I saw an application where the primary mentor said yes, I’ll meet with them one hour a week. That was not very encouraging because of the tremendous investments and literal dollar amount of resources that HSR&D is investing in you for your primary mentor to spend one hour a week is not a lot for the level of investment HSR&D is making. I have also seen people say they’re going to spend 5 or 10% times which I usually have to take a pause and say wow, that’s a lot. Is that really credible and are they really going to be able to do that? I’ve seen different letters and different plans where if there is a concordance between that person’s work and the mentee’s research plan, you kind of go oh. You can see why they are going to be meeting with them so much because it is really part of this larger portfolio of work and that makes sense. It just has to pass a sniff test too. Make sure that other people kind of take a look and say yeah, I think that really would make sense to have that work.

For myself, I have to tell you I’m one of those folks that spread very thin and I always have to be very careful who I take on as a mentee because I don’t actually want to damage their ability to be successful with an application because if a committee say wow, we know she is running these 17 different things, there is no way she can spend any more time with a mentee, then I would prefer to have somebody else be a primary mentor for that person so the stretched thinness of the primary mentor does not adversely affect that person. The flip side is super, crazy busy people are sometimes the ones who actually manage to do the mentoring too. You just have to make sure that it’s going to fly, both for you in reality and for the committee on review.

You have to specify the type of interactions. Maybe it’s ongoing meetings on existing projects. I have seen ones where they say my mentor is next door so we talk all the time. How ever it is you’re going to interact, it is important to actually say something about it. I wouldn’t get into gory detail, but they do want to know that there’s some three-dimensionality to the relationship. Speaking to the nature of interactions, what kind of content and approach will you use in working with each mentor and the time line. This is that dial in, dial out I was mentioning before.

Now respective areas of expertise again are important because it may include the type of clinician, the type of social scientist that you need and the history of experience and expertise that person brings to the mentoring relationship. That may also include the PI-ship of key studies that are directly related to your research plans. Maybe this person led a stepped wedge study already or has led a cluster randomized trial and you’re going to do one of those study designs in your research plans. So working with someone who has actually done one before and gotten it published is going to be really useful. Or maybe they led a seminal study in the topic area of your interest and it is going to really give you some insights so that you’re not starting from scratch. You can also include the track record and refer to their bio sketch. You can include other types of expertise and support along the way.

Now managing of mentoring I’ve talked about cast of characters and the like. I think the management of mentoring becomes very important as well. The idea here is how they will be combined and coordinated. There should be a plan for how you’ll interact with these folks in a meaningful and doable way which is why I gave you that example of the advisory committee. It was structured. You can call it into being and then it can disband until you need it again. Something that doesn’t make you the hub of way too many people. Again, you are clarifying who will be involved in what activities and when. Then how often you will meet with them individually or as a group and how you will handle discrepant input if that becomes a concern at all. I have not seen that handled necessarily explicitly that often but if you have a large group of content mentors, you may end wanting to be able to at least say that your primary mentor is going to keep the show running with you.

You also need to be able to distinguish yourself out of this mix. So if your topic is aligned with one or more mentors, you have to make sure your research plan does not look like you’re doing your mentor’s research. This is not a fellowship and you’re not being funded to work for your mentor. That’s a really important distinction to make because you have to have a pathway that establishes you as a distinct and independent investigator. The committee is pretty sensitive to continuing and supporting roles on your mentor’s project or pursuing independent work. There is this balance between I’m going to use the initial part of the CDA time to finish up papers because papers are a key part of our currency as academic researchers versus I’m going to keep doing some supporting things which means I’m not really pressing myself into service as an independent investigator. There is a balance in that along the way.

Now the mentoring environment is something the committee also looks at. The best scenario is your interests are aligned with your COIN’s focused or emerging area and so your COIN director writes a letter that says yes, this is how this person’s work fit in our strategic plan. The next best scenario with a non-COIN home, meaning maybe your interests link with a GRECC, a MIRECC, a PADRECC, a QUERI or some other group’s strategic priorities fit, then that’s fine. You need a letter from those folks as well and be able to speak to how this is the right home for you and that the COIN will still help you. Even though they are limited by their lack of expertise in your interest area, they are going to negotiate and help navigate and create a combined home for you perhaps between the COIN and a non-COIN home. Maybe there is no COIN at your shop and it really is that the heart of health services research is in one of these other kinds of centers or programs and you just need to be able to talk about how this home for you that you’re not just a one-time person in a big, huge organization. There is something organized around you to help support your success. Whatever that home may be. You will probably have all wide array of homes that you might be thinking about.

So if your interests are not related to your COIN or other group’s expertise or interests, it may be that the university has the right expertise or links but you will still need a primary VA mentor. You can use a non-VA mentor as a co or secondary mentor but you have to think about what the extent to which your interests are amenable to adaptation, to fit the environment’s strengths.

Now I say that mostly because you want to make sure you don’t look like you are basically a university CDA in VA clothing if you will. Again the competition for CDAs has gotten very tough and I’m sure the committee will be very interested in making sure that even with a strong university link, that in the end of the day, you are going to be a VA independent investigator. Otherwise go get a K award, right?

All of that said, I would say try not to over torque yourself. The committee picks up on square pegs trying to fit into a round hole. I think it is better to be either true to yourself or deciding what you’re capable and willing to adapt to fit. If it really is not the right fit and there is no way you’re going to get local support and you can’t get the right mentorship team together, you may literally have to consider relocation or a different type of career development experience or some other strategy. CDAs are not for everybody and you could have a wildly successful career without ever doing a CDA. Or there are people who have immersed themselves in related topics and found that they can do successful CDA work in a broader topic that fits their environment and then over time, they adapt those methods to the thorny issue they really were in love with. There are a lot of ways to move forward.

Point of full disclosure, I never had a CDA. They weren’t giving them to PhD s when I started but my center invested in me locally and provided me with the mentorship and the resources to develop my career regardless. So there’s a lot of ways to be successful.

Just a reminder, all of this information has to somehow fit in three pages. That means it’s going to require a lot of drafts. A lot of people write big, long drafts and then hone them down. It’s going to require honing the qualifications of your mentors to only the key points because many of your mentors are probably senior enough that you could write three pages just about them but that won’t work of course. The more mentors, consultants and collaborators, of course, you list, the less space you have even to fulfill the requirements of the mentoring plan because you’ll have to describe each of them, their roles and contributions and interactions. There is one trick to that I suppose. You can put some of that information in the mentor letters but a lot of the review committee probably focuses on your narrative so be careful. Just like you can’t use appendixes and BA proposals to hide methodologic information, that just doesn’t fly in VA. It actually doesn’t fly for NIH either particularly. You don’t want to have content that is required in the application hiding too far away either.

If anything, that mentor letter should map too what you have in your plan. I’ve seen plenty of review committee members’ reviews and critics say when the mentoring plan says A, B & C but the mentor’s letter says X, Y & Z. That’s a problem. Again, this is why these things have to be done early so everything sings together in the same note.

I just want to mention the red flags in all this area. Again, you need to meet with your mentors early and often. It is never too soon to start thinking about this. Most applicants also are not funded the first time but nearly 40% used to be funded at least by the second or third submission. Eventually this may be changing. Many of you may have heard that on this last go around that the cutpoint score was 160. I think that is a new level of brutal. I’ll be hones with you. But I do know that people are still getting funded. They’re doing really important work. I guess my message to you would be please take this recommendation seriously and put in the time and make sure that you can put together the best application because this is still a wonderful opportunity if you can align these stars.

Mentors may recommend at the 11th hour that you not submit. Now this is really painful when people have started to work 24/7, nights, weekends, whatever to try to get to the deadline. We have pulled people back from the brink of submission a few times. I usually have to take them out for drinks afterwards or something because it’s rough to be geared up for that. But if it’s not 100% ready for prime time, the submission could hurt you because you only have three shots at this. Consider your own and your mentor’s competing demands and timelines to make sure that you are in a position to have all hands on deck for the application and all of the associated paperwork that goes with it.

I’m going to stop there so we have time for questions. Our next seminar will be on the development of the research plan including a detailed review of the instructions and some examples. Basically we are open for questions.

Molly: Thank you very much. We do have great several pending questions. For anybody that joined us after the top of the hour, if you want to submit a question or comment, you can do so by using the control panel on the right side of your screen. Just go down to the bottom, click the plus sign next to the word questions. That will expand the dialog box and then you can submit your question or comment there. The first one that came in There is information on currently funded CDAs on the VA website with a list of mentors. Is there a way to search instead by mentor to see how many CDAs populate the QUERI?

Dr. Elizabeth Yano: I actually don’t know if there is a way to do that. I’m not familiar with the strategy for doing that. I’d have to get a little bit more information on whether or not you’re trying to see if there are mentors that have capacity to ask to mentor you or if it’s about seeing that they just have too many mentees or if you’re looking for expertise. But the initial answer is I don’t think that the system can be sorted that way. You can certainly also ask Rob Small. It’s [Robert.Small@va.gov](mailto:Robert.Small@va.gov) if there’s some specific information on existing awardees that he is in a position to provide.

Molly: Excellent, thank you. The next person writes Is it wise to ask my fellowship mentors to continue on as CDA mentors if they fit the parameters you have discussed or is it better to get new mentors?

Dr. Elizabeth Yano: That’s a great question. I’d say it depends upon the role and the reputation and the track record of your fellowship mentors. Since they follow the parameters, clearly they would have some demonstrated commitment to you. Perhaps you have even coauthored papers. If these folks have that kind of continuity with you, I think that that can be a good thing. If they have content expertise that overlaps, that’s kind of handy as well. It just depends upon whether or not they will fit in the bigger scheme. There is nothing that says gosh, you’ve now grown up past your fellowship mentor so you have to go find new folks. It depends upon who they are in your organization. So in some places the fellowship director or mentors are really good for that stage of your career but they may or may not have significant track records of funding in HSR&D. They may be more educationally focused. I mean it just varies. There is absolutely nothing that says you have to dump them and find a new date. If they fit and they work for you, I see no reason not to keep them. It’s just that organic nature and fit to what your career plan is, your research plan and who is going to be in a position to help you navigate in the organization. I hope that helps.

Molly: Thank you. The next question, Do mentors need a history of specific HSR&D grant success or is it okay if successful history of getting grants but they are from the DOD or RR&D?

Dr. Elizabeth Yano: Great question. On certain levels grant experience and track record is grant track record. So if this person has a successful history of funding in DOD and RR&D and the like, I think that that is just fine especially if that is relevant to the trajectory that you have. I think that what you might want to do is see whether or not there is someone that you can add to your committee who has HSR&D explicit expertise or experience just because my sense is different review groups, different things they look for and the like. What the committee will probably like is aha, this person will also learn how to get grants from additional sources and that’s not a bad thing. Just like having someone with a NIH track record would not be a bad thing. So it depends again also on the topic that you’re interested in, if it’s relevant to those funding sources. It’s that balance between whether the review committee takes a look at it and says well, HSR&D is a slightly different bird and it would be good to have this person or maybe the mentor could say I’m going to make sure that the RR&D and DOD experience translates into HSR&D by linking to this other group as well. Just in case that comes up for any reviewer. I can’t read their minds but if you’re a little bit concerned, it can’t hurt to handle it explicitly perhaps in the mentor letter.

Molly: Thank you for that reply. The next question, Is it better for ones local and distance mentors to know each other as well or for them to be more separate?

Dr. Elizabeth Yano: Oh actually that’s another great question. My sense is it is better for them to at least know each other because if they’ve never worked together before, that’s fine but they are supposed to be working in tandem and collaboratively to support you as a mentee. It may be that the first time they have every worked before is during calls to review drafts of your applications. At least they can get on the same page in terms of how to mentor you or guide some aspect of your career or research plan. They do not have to have a history of coauthorship with each other necessarily but I have seen critics that have said well there are these distance mentors, there doesn’t seem to be any connection to the primary mentor. How do we know that these people are going to be able to play nice in support of the CDA? I think it could even be in those mentor letters saying it’s been such a pleasure to begin to interact with Mentor X at this other place. I hadn’t worked with this person before but during the development of the application, I have really been able to come to appreciate this person’s expertise in A, B & C.

Molly: Thank you. The next question, One of my mentors is a VA Care Line Executive so provides me with clinical expertise, systems and logistical guidance, access to other people in leadership positions. They have been a site PI for many cooperative studies but not as much purely independent funding and this was seen as a negative when I applied for NIH K-type award. Is this the same case for VA CDA awards as well?

Dr. Elizabeth Yano: So Molly was this person a primary mentor, did it say?

Molly: Just says one of my mentors.

Dr. Elizabeth Yano: If it’s one of the mentors …

Molly: She wrote in co-mentor.

Dr. Elizabeth Yano: Okay. I would say that I would not be surprised for NIH K-award reviews to find that to be a negative. VA is really advanced in this notion of the real importance of doing partnered research and focusing on topics of importance to the organization. The fact that that person is also a site PI in cooperative studies means this person has in addition to operations expertise and clear knowledge of the healthcare system, actually does have additional expertise and not enough to be a site PI. So that’s kind of an unusual combination. I think that that would be not frowned upon as much in a VA application as NIH because of the VA’s emphasis in this way. I don’t think it would be seen quite as much as a negative. I’d say that you’d still need to go through the other kinds of issues I’ve talked about today about interactions, contributions and what that expertise is that that person provides, that they’ll have time to provide you mentorship which it sounds like they already have. So long as the other folks I’d say are somewhat more traditionally in terms of academic track records and funding and publication track records so that you’ve got the balance. But it would be very surprised if VA HSR&D would find that to be a negative.

Molly: Thank you. The next question, How much time is needed to write a good letter? When you say not the 11th hour, what would you suggest? Perhaps three months before submission if needed?

Dr. Elizabeth Yano: As a primary mentor, I’m usually at least outlining what I want to say for somebody several months ahead. I’d say that if the mentor is very busy and has got a lot of mentees and grants going on, they should be working on it with reasonable earnest a month ahead. You really want to get the other people’s letters a little bit earlier. All of this is kind of, it depends. Because if you get letters written too early and the person is still changing their research plan, which is very common to have it continue to evolve and emerge and sometimes after you get the whole application written, you suddenly go you know, now that we’ve gotten this far, we have to fuss with one of the aims. You don’t want your mentors to have to rewrite their letters unnecessarily. So I’d be thinking about the content. I’d be making sure that the person is prepared to set aside a chunk of time. It takes me a few hours of dedicated time to write a really good mentor letter. That said, I am probably an outlier. I’ve gotten critics back saying well, the primary mentor has this extensive six page, single spaced letter. I’ve got a little bit of a reputation in that regard. I’ve seen that for other mentors in other VAs. It doesn’t mean that six pages of just blah is the answer. It just means that I’m working on that case really hard to make sure that I’m tapping what that person’s unique expertise is. I’m documenting the relationship. I’m talking about the organic nature and emergence of their interest area and how it fits within the center. Since I’m a Center director, my letter becomes both center director letter and how the center will bring its resources to bear on this person’s success as well as my own direct commitment to that person. It takes some time. I think three months is too early because too many things could take left turns in the application itself at that point. Though one last thing on why I tend to write mine a little later than that is I try and get them to get their other letters in earlier.

For example, I had a mentee who got a letter from his dissertation chair talking about how wonderful he was and all but the dissertation chair decided to say but I’ve always been disappointed that he didn’t publish his dissertation papers. I’m like oh criminy. I was like lovely, lovely, lovely, big black eye right in the middle of the letter. The letter came pretty late in the game and I as one of the primary mentors in the application, did all of my usual stuff and then I said and I just want to point out I completely concur with Dr. X’s praise of this rising star, yadda, yadda and I am very pleased to point out that this candidate has now published four dissertation papers or whatever the case may be.

The primary mentor letter is an opportunity to put a context on all the other letters potentially and that can’t really be done that early. So I appreciate the questioner kind of saying so how soon do you have to really do it. Early to think about the content and pushing the other letters in so that you can put the bow on top. But make sure your mentor has time to really set aside.

The question that comes with that often is well, shouldn’t I just draft a letter for the mentor. I know that that’s not an uncommon practice along the way. I would say you want to take a certain care on doing too much of that if that is in fact what folks recommend you do at your center because even though you might try really hard to make them unique, they begin to start to sound the same because you’re a single person. I think the committee can really kind of tell when it’s in a different voice. Your primary mentor should, I think at least, and this is a philosophical point perhaps, be putting in the time and effort to put in a unique letter that comes from their [sound effect] to you.

So you’ll each have to figure out the pathway on that one. But I wouldn’t do it too early for the reasons that I described but it means that somehow it needs to be written within I’d say at least a few weeks of its submission date so that you can tie the bows together. The bows on top as I was describing. I hope that’s helpful. I know it is not a formulaic answer.

Molly: Thank you for that reply. I know we are at the top of the hour. Becky, do you have time to stay on for the last two questions.

B: I do.

Molly: If any of our attendees have to drop off, when you exit the session, please wait just a second while the feedback survey populates on your screen and take just a moment to respond to our few questions. We do look closely at your replies. The next question, Is there a minimum number of publications with your primary mentor that is recommended to establish a track record prior to applying for a CDA?

Dr. Elizabeth Yano: Another great question and I’m afraid there’s not a good answer for it. Sometimes we’ve had people who just moved to our VA so there’s not been time for their to be really coauthored papers. If the person has been around for awhile and they are in fact working together, then the opportunity to coauthor papers may be related to fellowship or project director or coinvestigator work and that’s reliant on how productive those particular projects have been. I’m afraid there is no magic number. We want to kind of make sure folks don’t just kind of willy nilly add folks to papers because I’ve seen that occur as well where people are crossing authorship lines pretty far on guidelines. I’d say that it is a mix of evidence for commitments. It is the mentor’s letter. It is that they have worked together before, that they have been productive and you can see that they are coauthored on something but there is really no rationale for coauthorship because you’ve got one of those primary mentors who’s a big senior person who will have the power and the influence to protect you but is not in your area. I think that it is reasonable to say we don’t \_\_\_\_\_ [01:03:27] their papers but we have all this other demonstrated ways that this person is committed to me but you will see for the content folks that’s where I’ve coauthored work with other VA people. I’d say it just needs to make sense but there is no particular number.

Molly: Thank you. Can you comment on additional opportunities for a CDA via the HBCU research scientist training program? A CDA too where the primary mentor is from an HBCU?

Dr. Elizabeth Yano: I don’t have direct experience with that. I think that it might be good to contact Rob Small regarding some of those opportunities and he may be able to direct you to someone with more experience with that. But it is an important opportunity and I know that BHSR&D is very dedicated to engaging more people in that opportunity and in fact have brought in some folks from the field with some expertise in that area. I would recommend going to Mr. Rob Small. [Robert.Small@va.gov](mailto:Robert.Small@va.gov) to find out if there are folks with more experience to talk to because I wouldn’t want to direct you inappropriately.

Molly: Thank you. We do have one last question that squeezed in. Are there top three major mistakes that you have learned that we should not do?

Dr. Elizabeth Yano: Top three. What a great question and I should probably add that to a future talk. I would not try and write a CDA in three months. I would really give it the time it warrants so that it’s thoughtful. These things are really competitive and hard and you want to make sure you’re giving it the time it’s due because it takes a lot of time. Since so few people get funded on first submission, you’re not just tying up your effort now, you’re tying it up for a second and potentially third round. So that’s one.

I would say the other mistake is to try and completely torque who you are to go down a topic area that fits other people’s interests but completely does not fit your own. I can’t tell you how many times I’ve had read applications or manuscripts. And I’ve given the example before of reading a dissertation paper for someone and when I was done reading the paper that had been rejected for multiple journals and I turned to the person and I said so you hated your dissertation. The person was shocked. I said I can see it in every other line of what you have written. So these things have to be something you really do care about. You might be able to torque a little bit but you can’t torque it to the point where the committee won’t kind of figure out where your heart is speaking from. That’s my opinion at least.

The third major mistake is going for a CDA if you don’t really need one because of the time investment. There are other strategies. There are other ways to do this. The competition for this is not minimal as I’ve said. I know some folks who have gone through three cycles and not been funded and it kind of casts a pallor over them, just a sadness for all the effort that’s gone in because there’s this notion if you don’t get a CDA, you’re somehow just not a good researcher. That’s just not the case. There are too many good people who have done well who didn’t get CDAs and there are lots of ways to be successful. There are lot of physicians within health services research and implementation science and this partnered realm for making a difference in what we do. Rather than beat yourself up on it, if this might not be the right fit, it’s figuring out what the right pathway is and getting the mentorship and the sources of support for that pathway.

That’s the best I can do under the gun.

Molly: Well, thank you very much. That’s great. Do you have anything you would like to wrap up with before I close the meeting?

Dr. Elizabeth Yano: Not specifically, but just thanks folks for their attention and I hope this has been helpful and the next session is going to get into some more details. Again it won’t be formulaic so folks looking for formula, I’d say the CDA itself will probably drive you a bit insane. These are very organic, I hate to overuse the word, I’ll have to go to a thesaurus and find new ones. It is a big process. It’s like writing another dissertation on steroids for those who know what a dissertation is like. It can be a really wonderful experience but you have to give it the attention it deserves. I just encourage you to make sure that all this fits and look forward to talking to folks next time.

Molly: Wonderful. Well, thank you so much again Dr. Yano for coming on and lending your expertise for our attendees. The next session in this miniseries will be on May 12th at the same time, same place, 12:00 p.m. eastern. Feel free to go to our online registration catalog and sign up for that. I am going to close out the session now so again please wait for the feedback survey to populate on your screen and take just a moment to fill out those questions. Thank you everybody for joining us and this does conclude today’s HSR&D cyber seminar.