



Proposed NAPCRG Mentorship Program and Workshop: Calling for Protégés!

Background

The importance of mentors to the development of junior researchers is well documented. Important mentoring activities include professional socialization, role modeling, nurturing, teaching, and advocacy.

Unfortunately, mentors in family medicine research are few and, at times, difficult to find. There are several reasons for this problem. First, the relative “newness” of the discipline means that there are few senior researchers in family medicine. Second, the number of productive investigators who could potentially serve as mentors is small. Third, those who currently serve as mentors are in demand and cannot serve the current pool of new investigators needing support from a mentor. Fourth, many family medicine mentors may not have had a mentor themselves and lack a role model of productive mentoring. Finally, even those who had a mentor have no explicit training on how to best serve as a productive, effective, and efficient mentor.

Based upon two consecutive membership surveys conducted 3 years apart, there is a considerable need for mentorship

among certain NAPCRG constituencies. On a 2005 survey, 39% of respondents indicated that they needed a research mentor. Although this figure dropped to 19% on the 2008 survey, novice researchers and those from community-based residencies continue to indicate a strong need for research mentorship (33% of both groups indicate a need for mentorship). In fact, “mentors” is among the most frequently indicated needs by respondents on open-ended questions concerning their research careers.

In addition, NAPCRG members readily indicate their willingness to mentor NAPCRG colleagues. On both the 2005 and 2008 surveys, 55% of respondents indicated that they were willing to serve as a mentor to novice researchers. Also, a workshop presented in Tucson for experienced researchers interested in “distance mentoring” was attended by 40 researchers.

In an attempt to increase the number, quality, efficiency, and productivity of research mentors in family medicine, a research mentorship workshop is being developed. The workshop will focus on matching mentors and protégés and having them get to know each other. At

“Mentors are guides. They lead us along the journey of our lives. We trust them because they have been there before. They embody our hopes, cast light on the way ahead, interpret arcane signs, warn us of lurking dangers and point out unexpected delights along the way.”—L.A. Doloz¹

the annual NAPCRG meeting, mentors and protégés will meet on the networking afternoon.

Workshop Activities

Workshop activities will be designed around central themes, including reasons for mentoring and being a protégé, the definition and process of mentorship, elements of “long-distance” mentoring, and productivity and outcomes. For example, is it a “natural human desire to share knowledge and experience?” (Homer) How would one describe a successful mentor-protégé pair? And how do successful mentor-protégé pairs find each other? When mentor-protégé relationships “go bad,” what happens? What gets in the way of success? What resources would facilitate successful matching? What would an effective and successful long-distance mentorship look like in terms of its structure and relationships? How could annual NAPCRG meetings be used or structured to facilitate building and sustaining mentorships? Are there aspects of mentoring that benefit men and women differently? What

about diversity in mentoring? How is “progress” defined, and how is it maintained?

Post-workshop Activities

These activities will include evaluation, ongoing contact, and resource utilization. An annual evaluation of the protégés’ scholarly activity and the mentoring relationship will be conducted. In addition, protégés will be asked to keep an online journal concerning their mentoring contacts and experiences. NAPCRG’s Mentorship Subcommittee will maintain quarterly contact with all mentors and protégés to assess status and facilitate progress. Mentoring resources will be posted on the NAPCRG Web site, and mentors will be en-

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Calling for Protégés!

couraged to use the online NAPCRG Consultants Directory for their protégés, if appropriate. Finally, we will create a mentor listserve to facilitate the exchange of ideas among mentors.

Selection of Participants

To facilitate the process, potential protégés interested in participating should submit a letter to the Mentorship Subcommittee, (griswol@buffalo.edu), indicating their research background, needs, and goals, along with why they want to participate and cannot find a local mentor. In addition, they will be asked to provide the names of their chair and research director. The subcommittee will review the applications and conduct telephone follow-up, at which time we will elicit information about their research interests, availability, and time for participation, as well as their commitment to attend the NAPCRG meeting. The subcommittee will select eight applicants to participate.

Once the protégés are selected, we will use the databases to identify two potential mentors for each protégé based upon their mutual research interests and country of origin. Potential mentors will be contacted. After having described the program and time commitment entailed, their willingness to participate will be sought. Once 16 potential mentors have been identified, plans for pre-NAPCRG instruction will be made. During this instruction period, potential mentors and protégés will be educated online concerning the nature of the program, our expectations and ground rules, and the basics of productive mentorship.

Reference

1. Doloz LA. Effective teaching and mentoring: realizing the transformational power of adult learning experiences. San Francisco: Jossey-Bass, 1986.

—Kim Griswold, MD, MPH
SUNY at Buffalo

Reflections on Planning the NAPCRG Annual Meeting

The NAPCRG Program Planning Committee is currently building on the success of the Montreal NAPCRG annual meeting and making plans for the 2010 meeting. In a year when the world markets were reeling and universities were going into financial meltdown, it was wonderful to see such a large number of submissions and attendees.

With more than 600 attendees and 580 applicants for presentation, NAPCRG continues to be the meeting for primary care research worldwide. This responsibility has made us reflect on what more we can do to share the findings that are announced at NAPCRG and highlight such meaningful research, not just to NAPCRG but to the primary care community and the public. We will be working on that process over the summer. We have also looked at some of the workshops and seen a need to explore social networking as a research tool

both for gaining information but also sharing knowledge from research. The balance of posters and oral sessions works well, but we are always looking at ways of improving the ability to share research findings as well as take advantage of networking. However, we are very aware of the maxim "If it ain't broke, don't fix it," so changes will be small, knowing as we do that NAPCRG is a complex adaptive system. More on these topics in later issues.

In the meanwhile, my advice to you is to prepare those results, submit the grants, and keep the process going. Plan your timetable so you can submit before April 19. So maybe miss the Salt Lake City Marathon on April 17 and prepare for the Vancouver Sun Run on May 9!!

—Martin Dawes, MBBS, PhD
Chair, NAPCRG Program
Committee, McGill University

The timeline for identifying protégés is as follows:

April 30	Application deadline for potential protégés.
May–June	Telephone interviews of potential protégés.
July 1	Protégés selected.
July–August	Identify potential mentors and elicit their commitment.
September–October	Pre-meeting instruction.
November	Workshop at NAPCRG annual meeting and mentor-protégé matching.

2010 NAPCRG Annual Meeting Call for Proposals Now Open

To submit your presentation, please visit: <http://www.napcrg.org/> and click on the "Click Here to Submit a Proposal Online" link.

SUBMISSION DEADLINE: April 19, 2010

The 2010 Annual Meeting will be held November 13–17, in Seattle, Washington

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Meet the 2009 NAPCRG President Award Winners

Patricia Carney, PhD

Patricia Carney received her PhD from the University of Washington in Seattle in 1994. Her doctoral training included two specialty areas: Health Services Research (Public Health and Community Medicine) and Educational Psychology. Dr Carney is currently professor of family medicine and associate director for Population Studies at the OHSU Cancer Institute. An active member of NAPCRG, Dr Carney's other memberships include: American Educational Research Association, Association of American Medical Colleges, the American Association of Preventive Oncology, and the Society of Teachers of Family Medicine.



or contributed to nearly 150 publications in these research areas.

In 2008, she became an associate editor of *Annals of Family Medicine*. Dr Carney is clearly busy but likes to be known as a "hostage to a good time;" she is a huge fan of Star Trek.

Inese Grava-Gubins, MA

Inese Grava-Gubins, MA, currently serves as the director of Research at the College of Family Physicians of Canada. She started her career in family medicine research when she joined the Department of Family Medicine at Case



Western Reserve University in Cleveland, working under Stephen Zyzanski, PhD, and Jack Medalie, MD, both well known to members of NAPCRG and others in the community of family medicine research. Her research interests include behavioral health, cross-cultural medicine, health services research, health workforce, patient education, practice-based research, and research capacity building.

Ms Grava-Gubins' long relationship with NAPCRG began when she attended her first NAPCRG meeting in Columbus, Ohio.

Dr Carney has contributed to the development of many research grants in breast, cervical and colorectal cancer screening, detection, and diagnosis funded by the National Cancer Institute, National Institute of Child Health and Human Development, the Agency for Healthcare Research and Quality, the American Cancer Society, and the Centers for Disease Control and Prevention. She has also developed educational research programs in family medicine, internal medicine, surgery, and obstetrics and gynecology. She has led

"I realized that I had found a very welcoming and friendly crowd of researcher colleagues, whose thinking flowed along the same lines as my own. I had found a new home," she says.

Life and her Canadian husband brought her to Canada, and soon afterward, Ms Grava-Gubins took on the role of director of Research at CFPC, where she began the work of helping build the discipline of family medicine research in Canada. At the same time, she worked diligently to keep NAPCRG high on the radar screens for Canadian primary care researchers and increasing NAPCRG's membership.

A ready resource and always willing to help, Ms Grava-Gubins has helped recruit members to serve on NAPCRG's Board of Directors and has served on the NAPCRG Communications Committee. As the chief liaison between the College's Section of Researchers and NAPCRG, Ms Grava-Gubins continues to work on a daily basis to build closer ties between Canada and the US through ongoing communications and the creation of opportunities that ensure a platform from which the strong and united voice for NAPCRG members can be heard at home and abroad.

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Family Medicine Research Fellowships At The University of Chicago & NorthShore University HealthSystem



The Department of Family Medicine invites applications for a 2-year research fellowship.

Masters of Science in Clinical Research (MSCR) or Masters of Arts in Public Policy (MAPP): Each fellow will take course work in basic biostatistics, epidemiology, and health services research and then either pursue one of these areas in depth (MSCR) or take courses in public policy, organizational theory, economics and others relevant to health policy (MAPP). Completion of an original research project is expected in both tracks.

Special Areas of Focus: Fellows may pursue a special area of focus or an area of their own choosing. Multiple mentors are available.

Reproductive Health – Mentors from OB/GYN and family medicine. Research focus on reproductive health outcomes, disparities, or service delivery.

Clinical Ethics – Offered with the MacLean Center for Clinical Medical Ethics. Coursework in bioethics and humanities, training in ethics consultation, and participation in weekly case conference.

Practice Based Translational Research – Focus on outcomes, quality improvement, comparative effectiveness, applied informatics, dissemination and implementation of evidence into practice, or clinical research in an established practice based network with EMR.

Applications are welcome from family medicine residents, fellows, practicing physicians or faculty. Stipend: \$56,000 per year plus full benefits.

Fellowship Director: Bernard Ewigman, MD, MSPH

Co-Director: Debra Stulberg, MD, MAPP

Contact: Sandra Wallace, swallace@bsd.uchicago.edu, or 773-834-9852

The University of Chicago is an AA/EEO employer

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2009 NAPCRG President Award Winners

Robert Phillips Jr, MD, MSPH

Dr Phillips graduated from the University of Florida College of Medicine in Gainesville, Florida, with honors. He did residency



training in family medicine at the University of Missouri-Columbia, where he remained for a research fellowship, completing a Master's degree in public health. He has served on the American Medical Association's Council on Medical Education, as the president of the National Resident Matching Program, and currently serves as vice-chair of the Council on Graduate

Medical Education. He currently leads NAPCRG's Committee on Advancing the Science of Family Medicine. His research interests include physician-health system interactions and their effects on quality of care, geographic information systems, and collaborative care processes.

In 2004, Dr Phillips became director of the Robert Graham Center, a research center sponsored by the American Academy of Family Physicians and dedicated to bringing a family medicine and primary care perspective to health policy deliberations. He is on the faculties of the Department of Family Medicine at Virginia Commonwealth University, Georgetown University, and George Washington University and practices medicine at Fairfax Family Practice Center.

Outside of work, he is husband to Katherine Phillips, PhD, father to three children, and coach for his son's basketball team.

Hope Wittenberg, MA

Ms Wittenberg came to Washington in 1981, after getting a Master's degree in physical anthropology from the University of Massachusetts, Amherst. She began work on Capitol Hill for the Hon. Hamilton Fish, Jr (R-NY), serving as his legislative assistant, staffing many issues including Medicare,



Medicaid, and other health programs.

For the past 24 years, she has worked in a government relations capacity for various physician organizations representing them on issues ranging from Medicare, physician payment, Clinical Laboratory Improvement Amendments, the End Stage Renal Disease program, and appropriations.

Eighteen years ago, she opened the Washington office of the Organizations of Academic Family Medicine as director of Government Relations. This office, now known as the Council of Academic Family Medicine, represents STFM, ADFM, AFMRD, and NAPCRG on Capitol Hill and with the Department of Health and Human Services on issues of interest to academic family medicine, such as funding for health professions training (Title VII), workforce (including Medicare GME), and research issues.

Call for 2010 Wood Award Nominations

The Maurice Wood Award for Lifetime Contribution to Primary Care Research is given annually to honor a researcher who has made outstanding contributions to primary care research over the course of a lifetime.

Scientists from all nations, working in all professional fields and scientific disciplines, are eligible to receive the Wood Award, which is presented at the NAPCRG Annual Meeting.

The award is named in honor of Maurice Wood, an early leader in primary care research and a founder of NAPCRG.

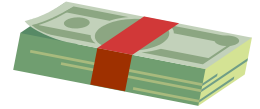
Previous recipients are: Curtis Hames, MD (1995), Martin Bass, MD, MSc (1996), Frans JA Huygen, MD (1997), Jack Medalie, MD, MPH (1998), Kerr White, MD (1999), Barbara Starfield, MD (2000), Ian McWhinney, MD (2001), Walter Rosser, MD (2002), Michael Klein, MD, CCFP (2003), Larry Green, MD

(2004), Henk Lamberts, MD, PhD (2005), Ann-Louise Kinmonth, MD, FMedSci (2006), Carol Herbert, MD, CCFP, FCFP (2007), Chris van Weel, MD, PhD (2008), and Ann Macaulay CM, MD, FCFP (2009).

NAPCRG solicits nominees for the annual Wood Award from members and other professionals. To nominate an individual for the 2010 Wood Award, submit a letter describing the nominee's contributions to primary care research

and state why the person should be a candidate. Include a CV with the nomination letter. Send nominations by April 12, 2010, to NAPCRG via e-mail to pnoland@napcr.org. Please note that nominations are held in the selection pool for 3 years. After that point, individuals will have to be re-nominated to be considered. Please contact the NAPCRG office with questions at 888-371-6397.

Show Me the Money: Funding Opportunities for Researchers



AHRQ is soliciting grants for Health Services Research Dissertation Program (R36) to ensure a diverse pool of highly trained health services researchers in adequate numbers and appropriate research areas to address the research mission and priorities of AHRQ. Application due date(s) are February 1, May 1, August 1, and November 1 annually, beginning November 1, 2009.

<http://grants.nih.gov/grants/guide/pa-files/PAR-09-212.html>

Another AHRQ grant opportunity is the Mentored Research Scientist Research Career Development Award (K01) which is designed to prepare qualified individuals for careers that have a significant impact on the quality, safety, efficiency, and effectiveness of health care for all Americans. Applications are due March 12, July 12, and November 12.

<http://grants.nih.gov/grants/guide/pa-files/PAR-09-087.html>

Support for primary care research in Canada can be sought through the Canadian Institutes of Health Research. CIHR provides funding opportunities for four themes of health research: biomedical, clinical, health systems services, and social, cultural, environmental, and population health. Several grant opportunities have deadlines coming up in March and April.

<http://www.researchnet-recherchenet.ca/rnr16/srch.do?all=1&search=true&org=CIHR&sort=program&masterList=true&view=currentOpps&fodAgency=CIHR&fodLanguage=E>

Advancing the Nation's Health: A Guide to Public Health Research Needs, 2006–2015 (Research Guide) is helping academicians and practitioners articulate critical research needs and is a resource for research areas that should be addressed during the next decade by CDC and its partners in response to current and future needs and events.

<http://www.cdc.gov/od/science/PHResearch/cdcra/AdvancingTheNationsHealth.pdf>

ARRA OS Recovery Act 2009 Limited Competition: Enhanced Registries for Quality Improvement and Comparative Effectiveness Research (R01) is inviting applications from organizations that propose to develop the infrastructure and improve the methodology for collecting prospective data from electronic clinical databases to generate new evidence on the comparative effectiveness of health care interventions. The application due date is March 29, 2010.

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-10-020.html>

ARRA OS Recovery Act 2009 Limited Competition: Scalable Distributed Research Networks for Comparative Effectiveness Research (R01) is seeking applications from organizations that propose to develop the infrastructure and improve the methodology for collecting prospective data from electronic clinical databases to generate new evidence on the comparative effectiveness of health care interventions. The application due date is March 10, 2010.

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-10-015.html>

AHRQ is interested in funding a diverse set of projects that develop, test, and evaluate various simulation approaches for the purpose of improving the safe delivery of health care through its Improving Patient Safety Through Simulation Research (R18). Applications are due March 26, 2010.

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-10-018.html>

AHRQ is intending to fund extramural health services research, demonstration, dissemination, and evaluation grants that propose to prevent and more effectively manage health care associated infections (HAIs) through its Prevention and Management of Healthcare Associated Infections (R18) grant program. The initial application due date is March 29, 2010; thereafter, standard NIH submission dates apply.

<http://grants.nih.gov/grants/guide/pa-files/PA-10-089.html>

Results of Research Ethics Quiz

In your opinion, what is the most important message to convey to a potential subject when summarizing informed consent?

- | | |
|----------------------------------------------------------------------------|-----|
| A. That they can withdraw at any time without prejudice | 49% |
| B. That no benefits of participation can be guaranteed | 7% |
| C. The potential side effects that they may experience if they participate | 34% |
| D. The reason that they are being asked to participate. | 12% |
| E. The compensation they will receive for participating. | 2% |

** From opinion survey of NAPCRG members (41 respondents) conducted at the 2009 NAPCRG Annual Meeting.*