



Transforming Medical Education through Collaboratories Request for Proposals Frequently Asked Questions

The Robert D. and Patricia E. Kern Institute for the Transformation of Medical Education at the Medical College of Wisconsin is pleased to release a request for proposals to build *Medical Education Transformation Collaboratories*, cross-institutional, multi- and inter-disciplinary, multiple stakeholder communities of practice that work together in a sustained effort around a shared project to transform medical education by engaging in both innovation and scholarship.

In this document, please find Frequently Asked Questions about the RFP and their associated answers.

New Questions Added February 16, 2021

1. The proposal requires a letter of support from the IRB. What does that mean?

We want to ensure that your team understands that your research proposal, if funded, will require IRB approval. Please ask your IRB to draft a letter acknowledging they are aware of your project and will review your application if you submit one. You do not need to obtain IRB approval before submitting your proposal.

2. The RFP suggests 3–5 people per collaboratory. Is it okay if our proposal includes more?

Absolutely. The range of people is up to you, and you should focus on assembling what you judge to be a strong collaboratory, regardless of number of people.

3. Will you release the rubric the merit reviewers will use for the full proposals?

This rubric is still under development. In future funding rounds, we will make it available. The categories of review from the LOI reviews will be similar for full proposals. We expect to ask our merit reviewers to consider each category in greater depth.

4. How important is it to include elements of caring and character in our proposal?

In general, the inclusion of caring and character will be used to differentiate between similarly high quality proposals. A proposal that includes caring and character as part of an idea that merit reviewers consider mundane and infeasible will not be prioritized over a proposal with an

audacious yet feasible idea that includes fewer elements of caring and character. With that said, we believe the proposals most likely to be funded will be audacious, feasible, and will include caring and character in medical education as part of the core of their idea.

5. Receiving one year of funding is enough to get our idea started, but we need more than one year to achieve our goals. How should we discuss this in the proposal?

We are open to extending funding for a second year. To address this in your proposal, please be as specific as possible about what you expect to achieve in the first year of funding and then in a second year. This will help our merit reviewers assess your proposal against proposals that have planned for only one year of funding.

6. Can we include members of the collaboratory who are not part of the budget?

Absolutely, yes. Not everyone proposed as part of the collaboratory must be funded in your proposed budget. We understand our modest funding amounts are unlikely to cover all the proposed work in the most audacious plans.

7. As we plan our proposal, we are struck by the dialectic between audacity and feasibility. Any guidance for how to balance these things?

In general, we trust the proposal authors to have a better sense of how to balance these two (at times) counteracting forces. With that said, it is probably better to prioritize something that can be reasonably accomplished, even at the expense of audacity. One way to approach it is to scale the problem to be addressed to what is feasible (especially with a year timeline), while holding to a broader and audacious plan for change.

8. The proposals ask for a community member who can consult on research design, data collection, analysis, and interpretation. Does this mean we need a community member who is an expert in research, or simply a layperson who can serve as more of a community advocate and consultant?

The latter. The community member does not need to be an expert in research design to, say, look over a proposed survey and give feedback on how questions are worded. They do not need to be an expert in recruitment to give suggestions on what community locations would be good to reach certain demographics. Having a community partner is meant to increase the chances of project success by ensuring researchers are not outsiders taking from the community but instead are collaborative members of a community, working with the community, and giving back to the community.

Previous Questions

1. What are you looking for in submissions?

In general, we seek submission from teams of 3 to 5 individuals who will devote compensated time to build a community of practice around medical education transformation. These

collaboratories will serve as incubators for the creation of generalizable knowledge as we move rapidly into a new era of medical education. Eligible groups must include at least one member employed at an LCME-accredited medical school, with other members currently affiliated with institutions or organizations with a stake in health and healthcare.

The full RFP details some of the priority topics, and we encourage you to review them carefully.

2. The RFP advises proposals build teams of multiple individuals, from multiple disciplines, and multiple institutions. Will funded proposals really involve people who meet all those categories?

We recognize that assembling a successful team for your collaboratory depends more on working relationships than it does on checking boxes. The guidance in the RFP is merely guidance and advice. We hope proposals will make an effort to assemble a collaboratory with broad experience, and we recognize the practical limitations of assembling a successful team that checks all those boxes. The most important aspect of a successful proposal is commitment to the collaboratory philosophy.

3. The RFP says funding will be prioritized for Kern National Network (KNN) schools. Is there a way to join this organization?

The Kern National Network is a group of schools who receive funding from the Kern Family Foundation to implement caring and character in medical education. It is not a membership organization, so there is not a way to join it.

4. If our school is not part of the KNN, should we bother applying since funding will be prioritized for KNN schools?

Please do not let the KNN criterion deter you from applying! All proposals will be scored based on the merits of their idea and proposed collaboratory. If a tie-breaking criterion is needed, then KNN membership may be used. We will fund work that is audacious and innovative with new collaboratories that will have lasting impact, regardless of affiliation with the KNN.

5. What parts of research can be funded through the RFP?

These grants can pay for researchers' time and incentives for participants. The funds may not be used for any other purpose, including equipment or facilities and administration costs. This requirement is in place because of the source of the funds (the grant that funds the Kern Institute), and we hope this restriction will not deter researchers from submitting innovative proposals.

6. My idea needs funding for more than that. Is there any other way to get funding in connection with this RFP?

We recognize that not all ideas will fit under this funding structure. We encourage you to see other funding in conjunction with this opportunity. We also encourage you to scale your projects

based on what our funding can cover. For example, perhaps you can propose a pilot project from these funds that will be used to apply for broader funding elsewhere.

7. Must proposals focus on educating physicians, or can they focus on education of other professions within healthcare (e.g., EMS workers, pharmacists, etc.)?

We recognize the need for transformative medical education in all realms of healthcare. For this RFP, all funded proposals will focus on transformative medical education for physicians; proposals may also focus on education efforts in other healthcare professions. For example, a proposal for inter-professional education that includes medical students and students in other disciplines is acceptable.

8. Does the proposal need to include elements of undergraduate medical education, or can it focus on graduate medical education or continuing education?

We are interested in the continuum of medical education and its transformation. As such, proposals can involve GME and continuing education, but all funded proposals will touch on UME in some way.

9. I would like to be involved with a collaboratory, but I cannot take on any more official (paid) responsibilities. If my time is not compensated in the grant, can I still be part of a collaboratory?

Absolutely, yes. We do not want our funding strictures to keep others away from projects. Serving as a member of a collaboratory in any role—even if not compensated—fits both the spirit and the letter of what we are trying to create through this RFP.

10. Our collaboratory would like to have partners who will not be part of our budget for funding. Is it okay to bring in outside members to be involved in our collaboratory right away and over the course of the award?

Yes. Not only is it reasonable to seek outside input, it is exactly what we are hoping to achieve through the collaboratories model. We would be thrilled if our modest funding produces both great scholarship AND lasting partnerships, especially partnerships between people with diverse expertise.

11. Will LOIs receive feedback, or is the LOI process only so that the funders know how many proposals they may receive?

Yes, all LOIs will receive constructive feedback.

12. Can I submit multiple LOIs?

We appreciate the enthusiasm that this funding opportunity is generating. We ask that you submit only your best idea and will consider 1–2 LOIs per collaboratory.

13. Will all proposals receive feedback?

Yes, all proposals will receive constructive feedback.

14. Do I need to submit an LOI if I intend to submit a proposal?

We encourage all teams considering submitting a proposal to submit an LOI. All proposals will be considered, even if they did not submit an LOI. If you are planning to submit a proposal and did not submit an LOI, please email us ahead of your submission so that our merit review panel knows how many proposals to expect.

15. How many proposals will be funded? How much total money is available?

The total amount of funding is flexible, and it is our intention to fund the most promising proposals, however many there may be.

16. Additional funds will be paid for publication in a peer-reviewed journal. Does that apply to any peer-reviewed journal?

We recognize that the publishing options for scholars are greater than they have ever been. In general, this additional compensation applies to any peer-reviewed journal. Journals excluded from this include predatory journals, journals that are not indexed in places like PubMed, and journals that are not associated with healthcare or education. We also exclude self-publishing or internal institutional publishing options (e.g., posting a “white paper” on a website). If you have any questions or concerns about this, please discuss your choice of journal with us ahead of submission.

17. I have an idea for a research project that cannot be completed in 1 year, which is how long the funding lasts. Should I bother submitting?

Ongoing funding is an option for the most promising proposals that make satisfactory progress over the course of their first year. We recommend you provide a specific timeline in your proposal with objectives you will achieve by set dates.

18. The LOIs and proposals require a letter of support from my institution’s IRB. But I won’t submit anything to the IRB unless my proposal is funded, so what is the IRB supposed to say in their letter?

We wish to affirm that the IRB is aware of the possible submission and that its general parameters are in line with their standards and expectations. For example, using an innovative curriculum to teach about the specific concerns of patients with respiratory challenges is probably in line with research your IRB regularly approves. Proposing to replicate the Stanford Prison Experiment with medical residents is probably not.

19. My proposal involves an existing collaboration with dozens of partner schools. Do I need a letter of support (from IRB or leadership) from each of those schools?

Please provide letters of support from only the principal investigator's school.

20. If funded, what must the collaboratory team commit to doing?

We will be an active partner with your research project, including providing technical assistance and support. Please plan to attend monthly check-in calls, submit quarterly progress reports, and attend a virtual conference to present your work-in-progress.

21. My question isn't on this list. Who do I contact?

Please contact Dr. Michael T. Braun (micbraun@mcw.edu) with any other questions, and thank you for your consideration of this RFP!