

Career Development for Staff Clinicians at the NIH

October 5, 2017

The Intramural Research Program (IRP) of the National Institutes of Health (NIH) recognizes the important roles that Staff Clinicians play in the success of our clinical research program in each Institute/Center (IC), their unique and highly specialized clinical skills and the significant contributions that have been made by this cadre of physicians. In order to more fully reflect the varied and vital roles that our physician-scientists have, such as providing highly specialized clinical care or leading complex patient-care teams to carry out complicated research trials, and to provide resources to clinical staff to carry out their responsibilities, this document specifies how the new position levels established in 2016 — Assistant Research Physician, Associate Research Physician, and Senior Research Physician — will be augmented by new authorities and clarifications of the role of the Staff Clinicians. While the official NIH Intramural Professional Designation (IPD) will remain “Staff Clinician,” these alternative IRP titles may be used, if preferred, in professional correspondence, websites, and CVs. Advancement to Associate and Senior Research Physician will require formal endorsement by the IC Clinical Director (CD) and Scientific Director (SD), and sign-off by the NIH Deputy Director for Intramural Clinical Research (DDICR). While these titles are listed in the context of Physicians, it is to be understood that alternative appropriate titles may be substituted for Physician, including Dentist, Nurse, Nurse Practitioner, Clinician, etc., as applicable. Any Staff Clinician who is a primary investigator on a clinical protocol or devoting more than 10% of time to independent research activities must have this research reviewed on a quadrennial basis by an IC BSC or equivalent process. All new titles will be registered with and recorded by the DDICR and in the Office of Intramural Research (OIR).

All Research Physicians will have letters of agreement negotiated with their supervisor, Clinical Director, and Scientific Director that specify the distribution of their work time among clinical care, research activities, and teaching responsibilities or other service, and indicate the resources available for conduct of research and the extent of their independence. This letter of agreement will indicate the amount of funding for travel to national scientific meetings for the specific Staff Clinician, including at least one meeting for continuing medical education purposes.

Assistant Research Physician

Staff Clinicians approved for the level “Assistant Research Physician” are individuals who have demonstrated a commitment to excellence in clinical practice, including attention to patient safety, clinical research or education and who possess the ability to integrate teaching and scholarship on an ongoing basis into the practice or learning of medicine and science. This title will be granted with the expectation and understanding that the designee will pursue a trajectory of accomplishments that could lead to the subsequent attainment of Associate Research Physician and the ultimate goal of Senior Research Physician. It is expected that the letter of agreement defining the responsibilities of the Assistant Research Physician will include travel for two scientific meetings, including one meeting for continuing medical education purposes.

Associate Research Physician

Staff Clinicians approved for the level “Associate Research Physician” are individuals who have demonstrated a commitment to excellence in clinical practice, clinical research and/or education and who possess the ability to integrate teaching and scholarship on an ongoing basis into the practice or learning of medicine and science. At this level, the physician is expected to have taken on leadership roles in the IRP, be knowledgeable in the development and conduct of clinical research trials as demonstrated through a successful track record of implementing trials or completed training in areas related to human subjects research, and be active in the professional community. This position is envisioned as equivalent to an “Associate Professor” in the academic clinical educator track in outside academic health centers.

Among the factors that will be considered, but are not all mandatory for the level of Associate Research Physician, are:

- significant role(s) within a quality clinical research program;
- scholarly achievements in scientific publication;
- delivery of quality patient care with attention to patient safety over an extended period of time to protocol participants as an Attending Physician or through a consult or diagnostic service;
- serving as a resource on the conduct of human subject research trials, including service on an Institutional Review Board (IRB), Data and Safety Monitoring Board (DSMB), or service as a voting member of search committees;
- major role(s) in the development and execution of multiple high quality clinical research protocols;
- leadership role(s) in the IC or NIH (e.g., IC Protocol Concept Reviewer, service on IC national search committees or other task forces or committees);
- significant role(s) in professional community activities such as national meetings, professional organizations, and extramural collaborations;
- major role(s) in the training and mentoring of clinical staff;
- receipt of NIH or IC award(s);
- additional exceptional factors that are added by and reflect the special character of the IC with the approval of the DDICR.

The Associate Research Physician will have a letter of agreement negotiated with their supervisor, Clinical Director, and Scientific Director that specifies the distribution of their work time between clinical care, research activities, and teaching responsibilities, and indicates the resources available for conduct of research and the extent of their independence. This letter of agreement will specify funding for travel of the Associate Research Physician to at least two scientific meetings including at least one meeting for the purpose of continuing medical education.

The Associate Research Physician can be the principal on Cooperative Research and Development Agreements (CRADAs) and Material Transfer Agreements (MTAs) and apply for grants if consistent with the time allotted to clinical research activities and with supervisory approval to initiate these activities.

For Associate Research Physicians who primarily provide clinical care, quality of clinical care and/or teaching will be paramount, with no expectation of research accomplishments.

Senior Research Physician

Staff Clinicians approved for the level “Senior Research Physician” will be considered national or international leaders in their field. At this level, physicians are expected to be active leaders in the IC (e.g. IC Advisory Board, IC Protocol Concept Review chairperson, service on IC national search committees, branch Fellowship Program Director/Assistant Director), to actively mentor other clinical staff and/or to develop and serve as PI of one or more clinical research trials. These individuals will have stature such that they are called upon as experts by outside institutions, are invited to give seminars at research institutions and national meetings, hold important roles in professional organizations, or serve on grant study sections. This position is envisioned as equivalent to that of a “Full Professor” in the academic clinical educator track in outside academic health centers.

In addition to the factors considered for Associate Research Physician as listed above, the following additional factors will be considered for advancement to this level:

- have received an “Outstanding” rating on the two most recent Quadrennial Reviews or BSC Reviews;
- be seen as an expert in the field, held in high regard by peers, as evidenced by such factors as being consulted by others inside and outside of NIH, invitations to speak at important professional meetings, receipt of national/international awards, or leadership role(s) outside of NIH in the extramural community, or high quality clinical research publications. Appointment as a Senior Research Physician does not require major independent research accomplishments, but in such instances, outstanding clinical skills and recognition for these are expected.

The Senior Research Physician will have a letter of agreement negotiated with their supervisor, Clinical Director, and Scientific Director that specifies the distribution of their work time between clinical care, research activities, and teaching responsibilities, and indicates the resources available for conduct of research and the extent of their independence. This letter of agreement will specify funding for travel of the Senior Research Physician to at least three meetings including a meeting or meetings for the purpose of continuing medical education, and will allow the Senior Research Physician to be the principal on CRADAs and MTAs and apply for grants if consistent with the time allotted to clinical research activities and with supervisory approval to initiate these activities.

Guidance for Request for Conferral of Status

All Staff Clinicians will receive designations outlined in this document by March 1, 2018, or within two years of appointment as a Staff Clinician. To initiate this process, the IC Clinical Director will propose a title for each Staff Clinician to the supervisor and Lab/Branch Chief or Deputy Chief for referral to the IC panel that reviews Staff Clinicians. The makeup of this panel is described in the plan submitted to the DDICR by each IC. This panel will make a recommendation to the IC's Clinical Director and Scientific Director. Review of Associate and Senior Research Physician requests will require additional endorsement by the IC Senior Leadership Team and by the DDICR. A Staff Clinician's supervisor, with the support of the Lab/Branch Chief, may request consideration of advancement as part of the quadrennial review process with all supporting documentation or may make the request independent of the quadrennial review. Recognition as Assistant Research Physician must be approved by the IC panel that reviews Staff Clinicians. Recognition as Associate Research Physician or Senior Research Physician must be specifically approved by the IC panel that reviews Staff Clinicians, the IC's Clinical Director and Scientific Director, and signed off on by the DDICR.

Without specific approval of this status, it is not conferred. If a Staff Clinician is not recognized by this process and disputes that decision, the Staff Clinician may consult with the DDICR to seek an alternative dispute resolution to determine if there is a procedural error resulting in the decision by the IC not to advance the Staff Clinician.

The request to designate a title for a Staff Clinician must include:

1. a memo addressing the criteria;
2. an updated CV and bibliography;
3. reference letters:
 - Assistant Research Physician — three letters of reference from collaborators or non-collaborators.
 - Associate Research Physician — three letters of reference from individuals who are not recent collaborators (NOTE: A recent collaborator is one who has made an intellectual contribution regarding the planning and conduct of experiments, clinical trials or publications within the last three years, with the exception of one who has merely shared reagents, patient samples, or whose name appeared on a common publication only as a result of consortia participation). Letters may be requested by the Lab/Branch using an IC reference letter template.
 - Senior Research Physician — three reference letters from non-collaborators outside NIH. Letters must be solicited by the IC.

External Candidates

Prior to the new appointment of a Staff Clinician, the availability of the position must be advertised and the selecting official must explain in a memo why the selectee has been chosen, with sign-off approval by the Clinical Director and the Scientific Director of the IC. A Staff Clinician being hired from outside of NIH may be appointed within two years as an Assistant Research Physician, Associate Research Physician, or Senior Research Physician at the request of the supervisor with support of the IC Branch Chief (if different). The specific IC panel will review these requests on an ad hoc basis.

Staff Clinician Agreement Template

*This agreement should be completed by **March 1, 2018**, for all Staff Clinicians who do not have an agreement. If Staff Clinicians already have an agreement in place, the due date for the new format is **June 1, 2018**.*

This agreement sets out protected time, independent resources, and travel for the period, [Date] to [Date] for [Name, Degree], Staff Clinician in the [Employing Lab or Office], [IC]. This agreement is subject to renegotiation at any time and will be re-issued at the time of quadrennial or BSC review and/or if advancement to the next level of Research Physician occurs. This agreement is based on a good-faith projection of funding and specific responsibilities of the Staff Clinician and will be observed by all parties, barring unforeseen circumstances. Activities supported by independent intramural NIH resources allocated directly to a Staff Clinician are subject to BSC review.

Research Physician Level: (Assistant, Associate, or Senior)

1. Division of effort

- Patient care/other service activity (minimum 50% per IPD requirement)
- Protected time for research activities (specify % of total)

2. Resources (as applicable)

A. Resources for assigned service duties

- Personal office space
- Clinic/lab space
- Personnel (direct reports only)
- Operating expenses

B. Resources for independent activity

- Space
- Budget & FTE
- Facility access

3. Web presence (Minimum is single page, linked to PI or Office page with picture, short bio, interests, and selected publications.)

4. Travel and training budget (Resources required for travel, maintenance of certification and licensure as appropriate for Research Physician level)

- Funding for travel to scientific and clinical meetings (domestic or foreign) per year or dollar travel budget (Sponsored travel does not count against this.) Specify dollar amount.
- Funding for at least one meeting for required maintenance of competence and certification (not capped for those with multiple board certifications to maintain). Specify dollar amount.