Learning Health Systems (LHS) K12 Application

DEADLINE: February 11, 2019 (11:59 PM)

Application Tips

Please read the following instructions carefully to ensure that you submit an accurate and complete application.

1. Carefully review the program requirements on the LHS K12 website before you begin.
2. You can complete a partial application and save and return to it later, but the application must be submitted within 7 days of beginning it. To save the application and resume later, click "Save Answers and Resume Later." You will receive a URL that you will need to save on your computer so that you may return to your partially completed application. Note that the URL takes you back to the first page (this one) of the application. To get to where you wish to resume completing the application, use the NEXT buttons at the bottom of the page.
3. If you choose "Save Answers and Resume Later" your PDFs will not be saved.
4. Given the limitations noted above we suggest that you print the PDF version of the application form posted on the program website to review what is required in the application and have everything prepared in advance that you need to complete the application. For example, since the bulk of the LHS K12 application requires you to upload separate PDF attachments, you will want to convert all word processed documents to PDF prior to beginning the application. Once you have all the required PDF attachments ready and organized, you can sit down and complete the application in a single sitting.
5. Only PDF formatted documents (no MS Word, Excel, PPT, etc) may be uploaded to the application. Be sure that the PDF attachments are not password protected or secured.
6. Before you submit your application, we suggest that you use the “Previous” and “Next” buttons at the bottom of the pages to review your application for accuracy. You won’t be able to submit the application if required elements are missing.
7. You are only allowed to submit the application once per primary email address. You are responsible for submitting a complete and accurate application. You will receive an email confirmation including a copy of your submitted application. If you discover that you have made a major error after submitting your application, please notify Madeline Mann. Note that any changes allowed to your application will be at the discretion of the LHS K12 program and must be completed and submitted prior to application deadline.

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https://ucsfcts1.formstack.com/forms/lhsk12
Applicant Information

First Name*

Last Name*

Middle Initial

Primary Email Address*

(Work email)

Alternate Email Address

(Personal email)

Mobile Telephone*

Position/Title (as of July 1, 2018)*

- Assistant Professor
- Other:

Primary Academic Institution*

- UCSF
Primary Delivery System Affiliation *

- UCSF Health
- SFHN
- VAMC
- Community Regional

Have you submitted or will you submit a K23/K08/K01/K07/K99 etc. to the NIH during FY19 (July 2018-June 2019)? *

- Yes
- No
Applicant Demographic Information

Sex *

- Male
- Female

How do you describe your gender identity? Gender identity refers to a person's internal sense of themselves (how they feel inside) as being male, female, transgender, or another gender. This may be different or the same as a person's assigned sex at birth. *

- Male
- Female
- Male-to-female transgender (MTF)
- Female-to-Male transgender (FTM)
- Prefer not to answer
- Other:

What are your preferred personal pronouns?

he/him/his, she/her/hers, they/them/their, etc.

Date of Birth *

[ ]
[ ]
[ ]

Citizenship

○ U.S. Citizen or Non-citizen National

○ Non-U.S. Citizen with a permanent US Resident Visa ("Green Card")

○ Non-U.S. Citizen with a Temporary Visa

If not a U.S. Citizen, of which country are you a citizen?

Are you Hispanic (or Latinx)? *

○ Yes

○ No

○ Do not wish to provide

What is your racial background? *

□ American Indian or Alaska Native

□ Native Hawaiian or other Pacific Islander

□ Asian

□ Black or African American

□ White

□ Do not wish to provide

check all that apply

Are you from a disadvantaged background? *

○ Yes

○ No
Do you have a disability (physical or mental impairment that substantially limits one or more major life activities)? *

○ Yes

○ No

○ Do not wish to provide

Publications

Please provide the number of publications that you have in peer-reviewed journals as of the date of application (do not include manuscripts in preparation or under review.)

How many total peer-reviewed publications do you have? *


Of these, how many are in the general topic area of your LHS K12 proposal on which you are first or last author? *

Board Certification - For Physicians

Are you board certified?

○ Yes

○ No
Quality Improvement Experience

How many QI Projects have you led?

How many in your primary clinical institution?

Clinical Experience
In the last two years, what percentage of time was spent in the following clinical categories?

Outpatient

Hospital/Inpatient

Emergency Dept/Urgent Care

Other

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Mentor(s) Information

Please list the following information about your Lead/Scholarly Mentor and up to 2 Co-Mentors

Lead Mentor's First Name *

Lead Mentor's Last Name *

Lead Mentor's Title *

- Assistant Professor
- Associate Professor
- Professor
- Other:

Lead Mentor's Institution *

- UCSF
- Other:

Lead Mentor's Email *

Lead Mentor's Primary Telephone *
Research Project

Research Project Title *

(90 characters)

List up to 3 MeSH* terms (or key words) that best describe your research *

*Medical Subject Headings (MeSH) is the National Library of Medicine's vocabulary used for indexing biomedical and health-related information.

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PDF Attachments

The following section requires you to upload PDF attachments. Once you have uploaded PDF attachments in the application, you should not attempt to "Save Answers and Resume Later" since your PDF attachments will not be saved.

LHS K12 Specific Forms

The following 4 sections use LHS K12 specific forms that you must download from the LHS K12 web site. Your Department Chair or Division Head, Lead Mentor, and Clinical Delivery System Sponsor must complete and sign the LHS K12 forms following the instructions provided on the forms. The completed, signed forms can then be scanned and converted to PDF prior to attaching to the application.

Candidate's Statement *

Choose File  No file chosen

File uploads may not work on some mobile devices.
Attach a PDF of your 2 page Candidate Statement.

Dept Chair/Division Head Statement *

Choose File  No file chosen

File uploads may not work on some mobile devices.
Attach a 1-PAGE PDF of the Dept Chair/Division Head Statement

Lead Mentor's Statement *

Choose File  No file chosen

File uploads may not work on some mobile devices.
Attach a 1-PAGE PDF of your lead mentor's statement

Clinical Delivery System Sponsor *

Choose File  No file chosen

File uploads may not work on some mobile devices.
Attach a 1-PAGE PDF of your Co-mentor’s statement
K23 APPLICATION ELEMENTS

Please refer to the NIH K23 Mentored Patient-Oriented Research Career Development Award Instructions (Section IV. Application and Submission Instructions)

We recognize that learning health systems research differs from traditional clinical-translational research in that the approach may change in response to the local context in which the research is embedded. While it may not be possible or desirable to adhere strictly to a planned intervention as written, the goal of the application is to review as complete and rigorous a study design as possible.

Project Summary/Abstract *

Choose File  No file chosen

File uploads may not work on some mobile devices.

Candidate’s NIH Biosketch *

Choose File  No file chosen

File uploads may not work on some mobile devices.
Note: Either the old or new NIH biosketch is acceptable for this submission.

Lead Mentor’s NIH Biosketch *

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Candidate Information *

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In addition to the standard elements of the candidate section, the candidate should describe their experience with health system improvement work and the role it will play in their career as a learning health system researcher.

Specific Aims *

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Research Strategy *

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In addition to the standard elements, candidates should include the following information: 1. Describe the healthcare delivery system setting in which you propose to work in detail. Enumerate the key stakeholders and describe the engagement strategy for these stakeholders. 2. Define the current gaps in care in the delivery system that you intend to influence as precisely as possible, and the evidence that supports closing these gaps as a strategy to improve patient-centered outcomes. Describe now unintended or unanticipated effects of any proposed interventions will be captured, documented, and reported. 3. Explicitly address the sustainability of any interventions you propose.

References *

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Protection of Human Subjects *

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WARNING: Please hit the SUBMIT key ONLY once. The system may take a few minutes to upload all of your information and attachments. If you hit SUBMIT more than once before processing is completed, you will lose your work.

BEFORE YOU CLICK SUBMIT YOU SHOULD REVIEW YOUR APPLICATION USING THE PREVIOUS AND NEXT BUTTONS AT THE BOTTOM OF THE PAGES.

ONCE YOU SUBMIT YOU WILL NOT BE ABLE TO EDIT YOUR APPLICATION.

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Submit