



## Executive Summary

### Robert Wood Johnson Foundation Clinical Scholars

The *Robert Wood Johnson Foundation Clinical Scholars* program provides post-residency training across specialties for young physicians interested in research and leadership careers in health policy, academic medicine, government, and elsewhere. Clinical Scholars learn to conduct innovative research and work with communities, organizations, practitioners, and policy-makers on issues important to the health and well-being of all Americans.

Originally authorized by the Board of Trustees in 1972, it is the oldest national program of the Robert Wood Johnson Foundation (RWJF). Since 1978, the U.S. Department of Veterans Affairs (VA) has collaborated in the program, providing substantial financial and in-kind research support. In 2012, the program had 25 first-year and 27 second-year Scholars, funded with a combination of grants from RWJF, the VA, and the four universities that host the program. As of August 2012, the program had graduated 1,199 Clinical Scholars.

[Read the full report.](#)  
[Learn more about the program here.](#)

### CONTEXT

To lead the transformation of an increasingly complex health care system, physicians have needed training in the organization and financing of health services, and a much deeper understanding of both the contribution of medical care to overall population health and of health care's impact on society and the economy.

Prior to the creation of the *RWJF Clinical Scholars* program, however, a physician who was interested in a career that addressed these broader health care issues had few options for additional training.

## **THE PROGRAM**

*RWJF Clinical Scholars* prepares physicians for leadership positions in academic medicine, public health, and elsewhere. The program has evolved over its long history in response to an array of challenges and opportunities. In the early years, the program focused on equipping physicians to do epidemiology and health services research, addressing the burden of disease in the population, how people get access to health care, how much care costs, and what happens to patients as a result of this care.

A program redesign that went into effect in 2005 added more training in leadership and in the skills necessary to conduct community-based participatory research (CBPR). CBPR recognizes that patients and/or community members have a role to play in designing research that involves them, and adapting the findings to their own health behaviors. In more recent years, Scholars have also focused more intensely on health policy research and policy change. Adding leadership, CBPR, and health policy training to the existing health services research curriculum makes this multi-specialty fellowship program unique when compared to other physician fellowship programs.

Since the program was founded in 1972, 15 universities have at some point offered graduate-level, post-residency training to Clinical Scholars. Four schools—University of California, Los Angeles (UCLA) David Geffen School of Medicine; University of Michigan Medical School; Perelman School of Medicine at the University of Pennsylvania, and Yale University School of Medicine—have been training the Clinical Scholars since 2005 and all four offer master’s degrees. See Appendix 1 of the full report for details on university participation in the program since it started.

The University of North Carolina Chapel Hill School of Medicine has hosted the national program office since 2007.

## **OVERALL RESULTS AND FINDINGS**

The results and impact of the *RWJF Clinical Scholars* program can be tracked in several ways:

- The ascendancy of Scholars into positions of leadership in health and health care fields
- The impact of Scholars on health services and health policy research

- The influence of Scholars broadly in medicine, pediatrics, and surgery, and within specialty areas of health care, notably urology and emergency medicine
- The more recent entry of Scholars into community-based participatory research

### **Graduates in Leadership Positions in Health and Health Care**

As of August 2012, the program had graduated 1,199 Scholars. While it is impossible to directly tie their experiences in the program to their later accomplishments, many Scholars routinely credit the program with helping them set their career course.

Many graduates have moved into leadership positions in academia— eight are current or past deans of schools of public health or medicine, 140 are department chairs, more than 100 are vice chairs and division chiefs, and 179 are full professors. Some 45 graduates are members of the Institute of Medicine, an honorific organization with more than 1,700 members and associates.

Scholars have also influenced federal health policy through high-level positions in agencies including the VA, the Department of Health and Human Services, and the Centers for Medicare & Medicaid Services; have directed a number of large, state and local health agencies and departments; and had senior roles with voluntary health care organizations and foundations.

### **Impact on Health Policy and Health Services Research**

When the *RWJF Clinical Scholars* program began, health services research and health policy research were new ideas. By making a long-term commitment to training hundreds of clinicians in these fields, the program helped legitimize and institutionalize them within academic medicine. Clinical Scholars hold leadership positions in these research fields and have been involved in some of the most influential studies in health policy over the past 30 years.

*Desmond Runyan, MD, DrPH*, a graduate of the program himself and the national program director since 2007 said, “The sustained commitment by RWJF and the VA to developing physician leaders is now paying off in a myriad of ways, including: new vaccine policies at the governmental level, rational use of preventive services by primary care providers, the development of new approaches to the quality of medical care, the creation and development of [the fields of] geriatrics and child abuse pediatrics, and in the attention to clinical effectiveness in therapeutics and procedures. Among the nearly million physicians in the United States, the odds are good that if a physician is an academic policy leader he or she will either have been a Clinical Scholar or have been trained by a Clinical Scholar.”

The growing influence of health services researchers in academia, many of them Clinical Scholars, catalyzed the development of a national infrastructure for health policy and health services research. In 1989, Congress created the Agency for Health Care Policy and Research (now renamed the Agency for Healthcare Research and Quality) to fund outcomes research and develop practice guidelines. The agency has had a considerable impact on efforts to improve the quality of medical care. In 1997, alumnus **John Eisenberg, MD**, became the director of the agency and remained so until his death in 2002.

Clinical Scholars have also had an influential role in setting prevention policy through their service on the United States Preventive Services Taskforce, which issues guidelines on health care practices and helps shape insurance coverage policies and research funding.

### **Influence on Core and Specialty Fields of Care**

Clinical Scholars have had a notable impact in the fields of medicine, pediatrics, surgery, urology, and emergency medicine.

**Pediatrics.** Five of the seven Pediatric Quality Measures Program Centers of Excellence, created by the Agency for Healthcare Research and Quality, are led by former Clinical Scholars. Their contribution to the field of quality measurement is also evident in a special, online-only issue of *PEDIATRICS* entitled “Visioning, Measuring, and Improving the Quality of Health Care for Children: Insights From the Robert Wood Johnson Foundation Clinical Scholars Program.” The special issue will be published in *PEDIATRICS* in March 2013.

**Surgery and Urology.** The field of surgery has been transformed by training Clinical Scholars who have gone on to positions of leadership and influence in a field that prior to 2000 had little expertise in health services research. Former Clinical Scholars **David R. Flum, MD, MPH; Clifford Ko, MD, MS, MSHS; David Axelrod, MD, MBA; Arden Morris, MD, MPH; Melinda Maggard, MD, MSHS;** and others helped organize the surgical health services community by founding the **Surgical Outcomes Club**. The club grew from seven mostly former Scholars in 2003 to 175 faculty, fellows, and trainees in 2012.

The program has trained seven urologists; three others are current Scholars, and the 11th trainee has been accepted to join the class of 2015. Graduates of the program, despite being few in number, have affected the field of urology in a substantive manner. Scholars have led successful projects in CBPR, primary-data-collection-driven outcomes research, and epidemiologic secondary data analyses. Scholars have also assumed key leadership positions within urology and in the wider policy sphere.

To showcase Scholar and alumni research in surgery, the *RWJF Clinical Scholars* national program office will be sending out a call for papers in January 2013 entitled “Transforming Surgical and Interventional Care—Insights From the *Robert Wood Johnson Foundation Clinical Scholars* program,” that will be published as a special section in a regular issue of *Surgery* in 2013.

**Emergency Medicine.** Scholars have also helped to propel the field of emergency medicine into the mainstream of health care, according to an [article](#) in the April 2010 issue of *Academic Emergency Issue*. As of 2012, some 41 emergency physicians have trained through the *Clinical Scholars* program.

### **Impact of Community-Based Participatory Research (CBPR) on Medical Schools and Communities**

As leaders in health and clinically related CBPR, Clinical Scholars have influenced the design of research at medical schools, and helped faculty members become more conversant in the challenges of the community around them. At the same time, their work has helped community partners become more fluent in the language of research.

The program’s CBPR focus provided the gateway to meet the need for medicine to be responsive to patients and diverse stakeholder priorities—which is at the core of health care reform movement and initiatives such as the Patient-Centered Outcomes Research Institute (PCORI).<sup>1</sup> Through the CPBR focus, Scholars have received training in rigorous health services research methods and in the application of these methods to policy and implementation areas, and also learned how to build partnerships to do this work.

Scholars’ projects across sites consistently include a hybrid of these components—which are also echoed in the projects of National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) led by Clinical Scholars program faculty.<sup>2</sup>

Thus, the program has created a cadre of leaders poised to take the initiative in the reform of local and national services systems. Many Scholars are now going into policy, public service, implementation, and evaluation positions with high levels of responsibility at an early career stage. Three features of the program have supported the growth in these areas:

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<sup>1</sup> The institute is authorized by Congress to conduct research to provide information about the best available evidence to help patients and their health care providers make more informed decisions. PCORI’s research is intended to give patients a better understanding of the prevention, treatment, and care options available, and the science that supports those options. PCORI is located in Washington. See [www.pcori.org](http://www.pcori.org) for more information.

<sup>2</sup> These include the UCLA-Drew National Center on Minority Health and Health Disparities Project EXPORT, the National Institute of Mental Health Partnered Research Center, and projects at the [Clinical and Translational Science Institute \(CTSI\)](#) at New York University, which have all benefited from and continue to support the work of Scholars.

- The focus on CBPR and partnered research, as well as collaborations with community and policy agencies
- The growth of off-site policy electives such as spending one to three months in Washington with Assistant Secretary of Preparedness and Response, Nicole Lurie, MD, MSPH, at the U.S. Department of Health and Human Services
- The growth of the Clinical Scholars alumni network and extended connections with leaders in policy sectors including former scholars in senior policy leadership positions

A supplement to the December 2009 issue of the *American Journal of Preventive Medicine* includes 14 articles showcasing community-based participatory research conducted by Scholars and alumni.

### **Opportunities for the Future**

The *Robert Wood Johnson Foundation Clinical Scholars* program, by virtue of its longevity and the productivity of its graduates, has become an institution in and of itself. As with any institution, program staff must find the proper balance between continuity and reformation, particularly at this unprecedented time in American health care. Going forward, three elements—health services research, community-based participatory research, and leadership development—will remain at the core of the program. This is an unprecedented time in American health care—providing a unique opportunity for the Foundation to guide the training of the next generation of leaders who will shepherd in needed changes in the country’s health care system.

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#### **Program Management**

National Program Office: University of North Carolina at Chapel Hill School of Medicine

Program Director: Desmond Kimo Runyan (303) 864-5333; [Desmond.Runyan@childrenscolorado.org](mailto:Desmond.Runyan@childrenscolorado.org)

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