



# Building a Pipeline Of and the Capacity For Pediatric Disaster Scientists

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# Disclosures and Funding:

- ***National Institute of Child Health and Human Development***, grant #R24 HD085927
  - The Value of Pediatric Readiness in the Emergency Care of Injured Children
  - 9/30/2017 - 6/30/2022
- ***Health Resources and Services Administration***, grant # H34MC332430100
  - *A Multi-State Evaluation of Emergency Department Pediatric Readiness: Guideline Uptake and Association with Quality, Outcomes, and Cost*
  - 9/1/2019 – 8/31/2023
- ***National Institute of Child Health and Human Development***, grant #R01 HD108017
  - Risk prediction and optimizing outcomes to 1-year after firearm injury among children using emergency services in the US
  - 9/17/2021 – 8/31/2024
- ***NHLBI/NIMH/NINR K12*** in Emergency Care Research
  - 7/1/2016 – 6/30/2022

# Building a Pipeline of Pediatric Disaster Scientists

- Inherently inter-disciplinary
- Need for broad collaborations
- Seek to catalyze the scientific field
- Networking opportunity
- Sharing research ideas across disciplines and across sites
- Mentorship

# A Case Study: Emergency Care Research

## Part I Overview Information

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### Department of Health and Human Services

#### Participating Organizations

National Institute of Health (NIH) (<http://www.nih.gov>)

#### Components of Participating Organizations

National Heart, Lung, and Blood Institute (NHLBI) (<http://www.nhlbi.nih.gov>)

**Title: NHLBI Research Career Development Programs in Emergency Medicine Research (K12)**

#### Announcement Type

New

**Update:** The following update relating to this announcement has been issued:

- [June 5, 2015](#) - This RFA has been reissued as [RFA-HL-16-019](#).
- [August 16, 2010](#) - IMPORTANT NOTE! NIH has eliminated the error correction window for due dates of January 25, 2011 and beyond. As of January 25, all

#### Request for Applications (RFA) Number: **RFA- HL-11-011**

NOTICE: Applications submitted in response to this Funding Opportunity Announcement (FOA) for Federal assistance must be submitted electronically through Gra

**APPLICATIONS MAY NOT BE SUBMITTED IN PAPER FORMAT.**

This FOA must be read in conjunction with the application guidelines included with this announcement in [Grants.gov/Apply for Grants](#) (hereafter called Grants.gov//

A registration process is necessary before submission and applicants are highly encouraged to start the process at least four (4) weeks prior to the grant submissio

#### Catalog of Federal Domestic Assistance Number(s)

93.837, 93.838, 93.839

#### Key Dates

**Release/Posted Date:** July 16, 2010

**Opening Date:** August 6, 2010 (Earliest date an application may be submitted to Grants.gov)

**Letters of Intent Receipt Date(s):** September 7, 2010

**NOTE:** On-time submission requires that applications be successfully submitted to Grants.gov no later than 5:00 p.m. local time (of the applicant institution/organiz

**Application Due Date(s):** October 7, 2010

**Peer Review Date(s):** March-April 2011

**Council Review Date(s):** May 2011

**Earliest Anticipated Start Date(s):** July 1, 2011

**Additional Information to Be Available Date (Activation Date):** Not Applicable

**Expiration/Closing Date:** October 8, 2010

- NHLBI K12, 2011-2016
  - 6 sites
- NHLBI/NIMH/NINR K12, 2016-2021
  - 4 sites
- Co-PI structure
- Internal Advisory Committee
- External Advisory Committee
- CTSI resources

# The 1<sup>st</sup> K12 ECR Program

- 43 scholars, 6 sites
- Follow-up = 3-5 years

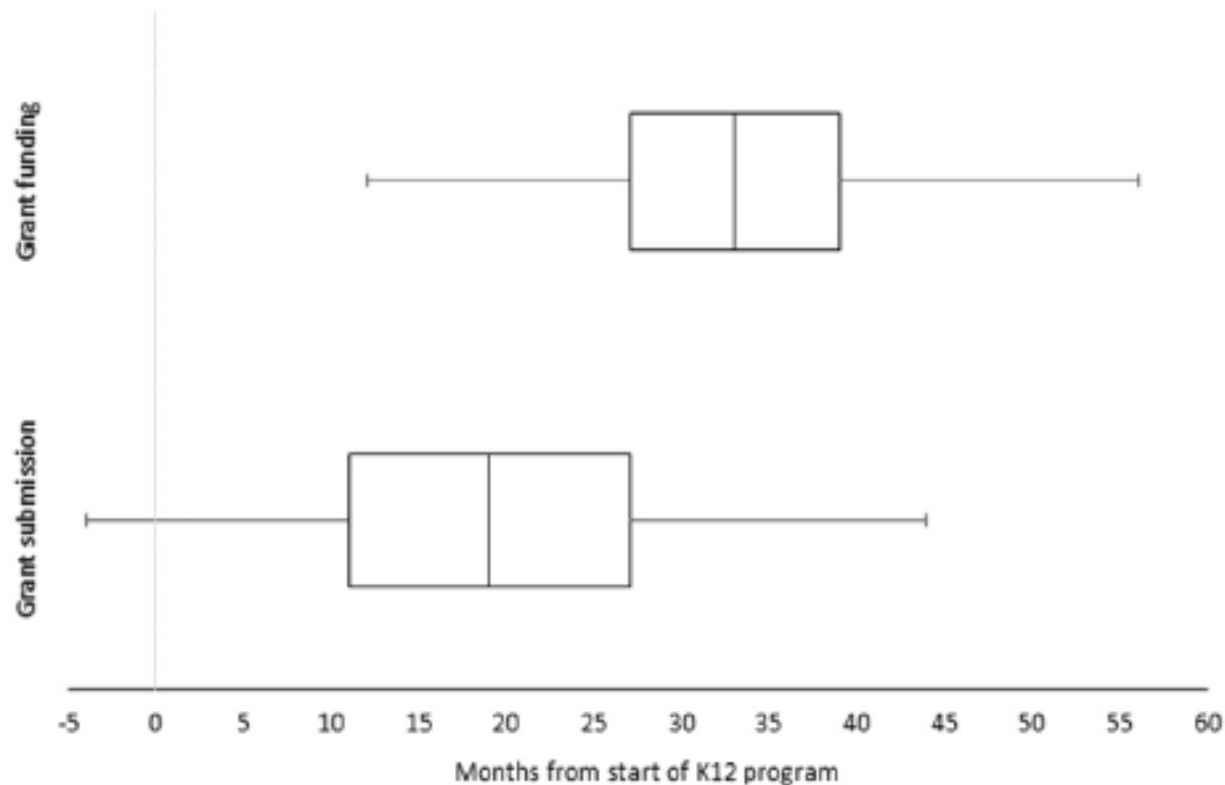
The First National Institutes of Health Institutional  
Training Program in Emergency Care Research:  
Productivity and Outcomes

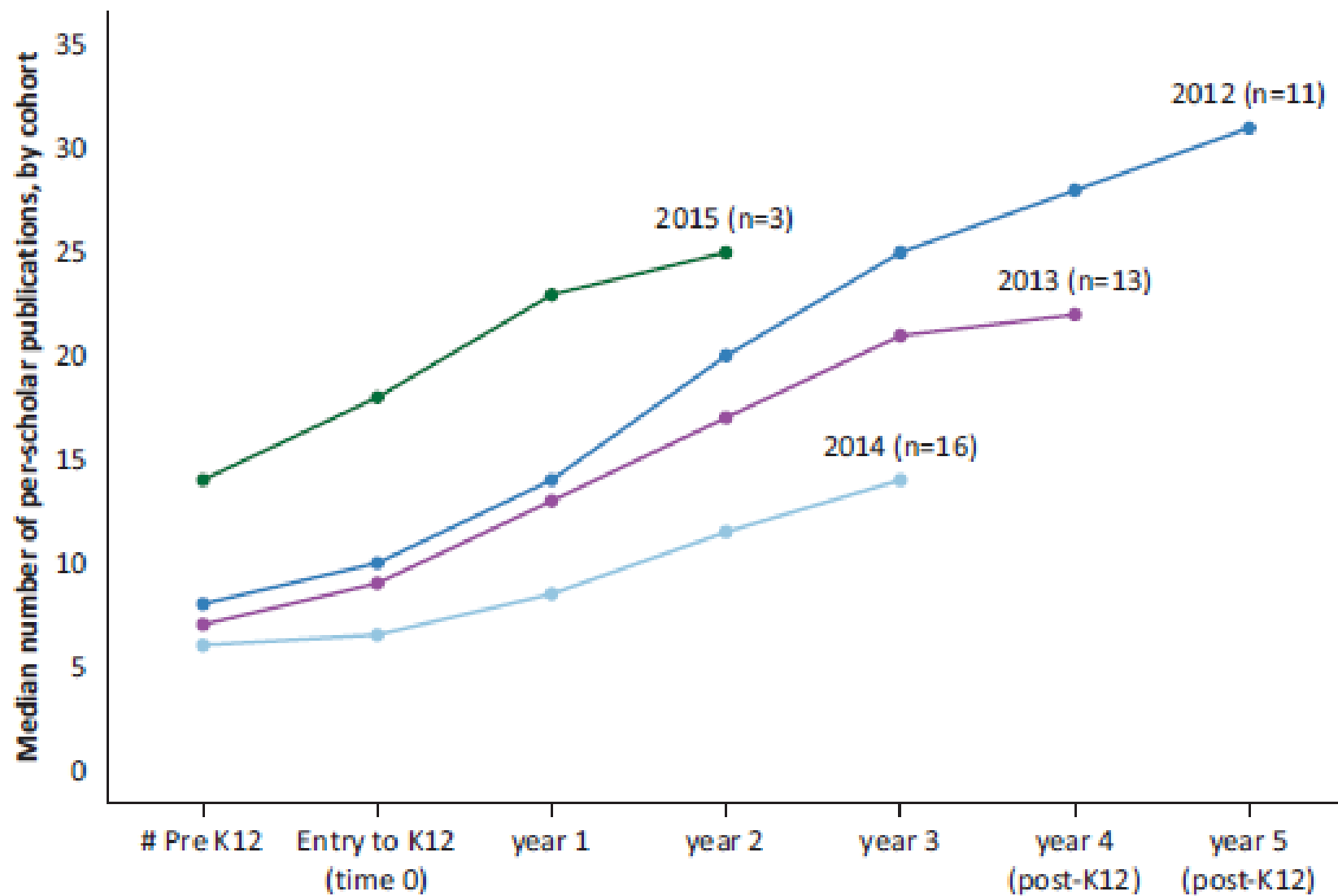
Craig D. Newgard, MD, MPH\*; Cynthia D. Morris, PhD, MPH; Lindsey Smith, MPP; Jennifer N. B. Cook, GCPh;  
Donald M. Yealy, MD; Sean Collins, MD, MS; James F. Holmes, MD, MPH; Nathan Kuppermann, MD, MPH;  
Lynne D. Richardson, MD; Stephen Kimmel, MD, MSCE; Lance B. Becker, MD; Jane D. Scott, ScD, MSN;  
Robert A. Lowe, MD, MPH; Clifton W. Callaway, MD, PhD; L. Kris Gowen, PhD, EdM; Jill Baren, MD, MS;  
Alan B. Storrow, MD; Nicole Vasilevsky, PhD; Marijane White, MSLS; Adrienne Zell, PhD

## ***Professional discipline:***

Emergency Medicine	18 (42%)
Pediatric Emergency Medicine	6 (14%)
Adult Critical Care	5 (12%)
Cardiology	5 (12%)
Pediatric Critical Care	2 (5%)
Trauma Surgery	2 (5%)
Pediatric allergy and immunology	1 (2%)
PhD, nursing	1 (2%)
PhD, epidemiology	1 (2%)
PhD, comparative pathology	1 (2%)
PhD, clinical research, physiology and biophysics	1 (2%)
TOTAL:	43


- 40 of 43 (93%) submitted a CDA or RPG
- 26 of 43 (60%) were awarded a CDA or RPG in 3-5 year follow-up period









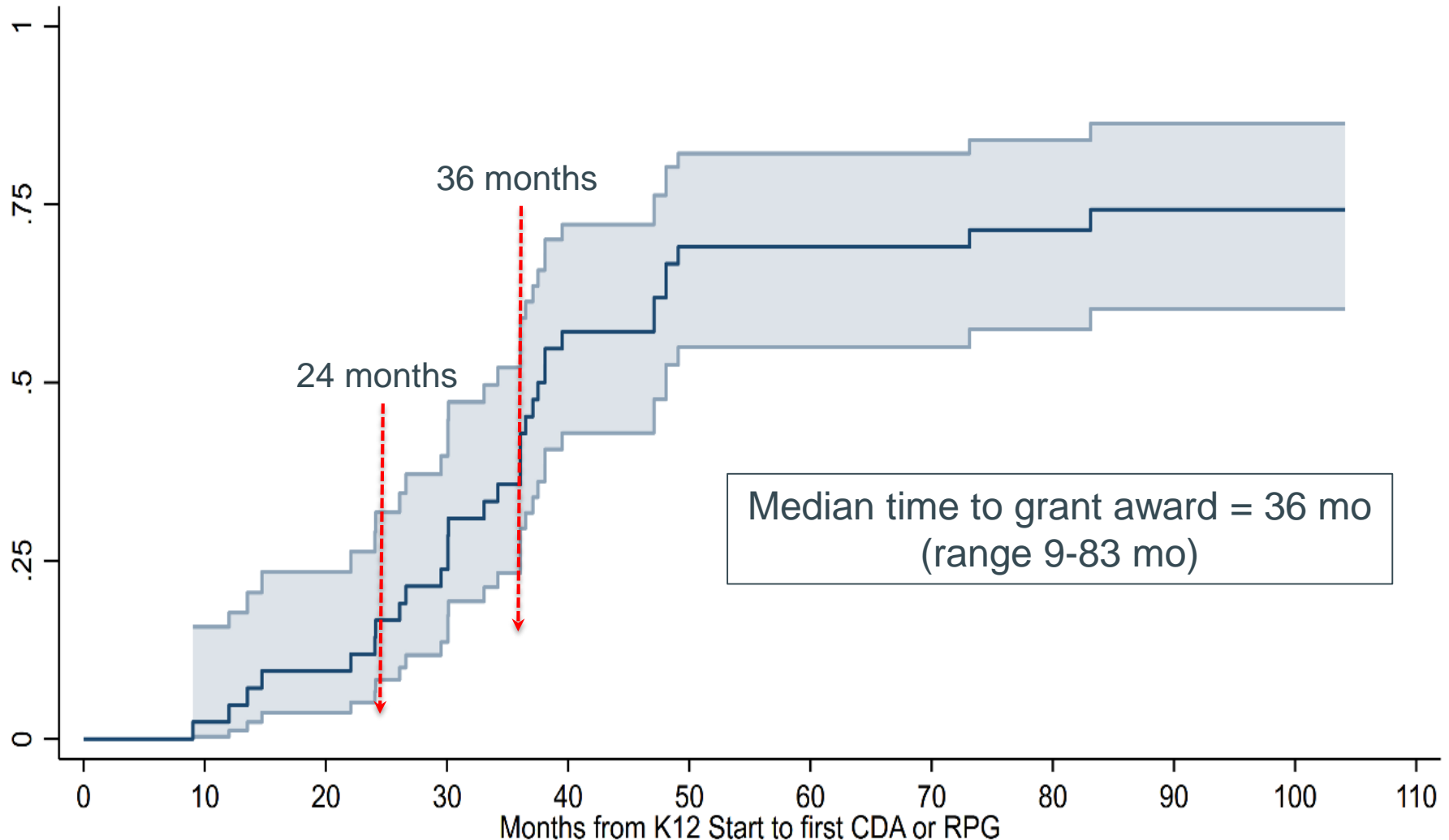
ORIGINAL CONTRIBUTION |  Full Access

## Outcomes of the National Heart Lung and Blood Institute K12 Program in Emergency Care Research: 7-year Follow-up

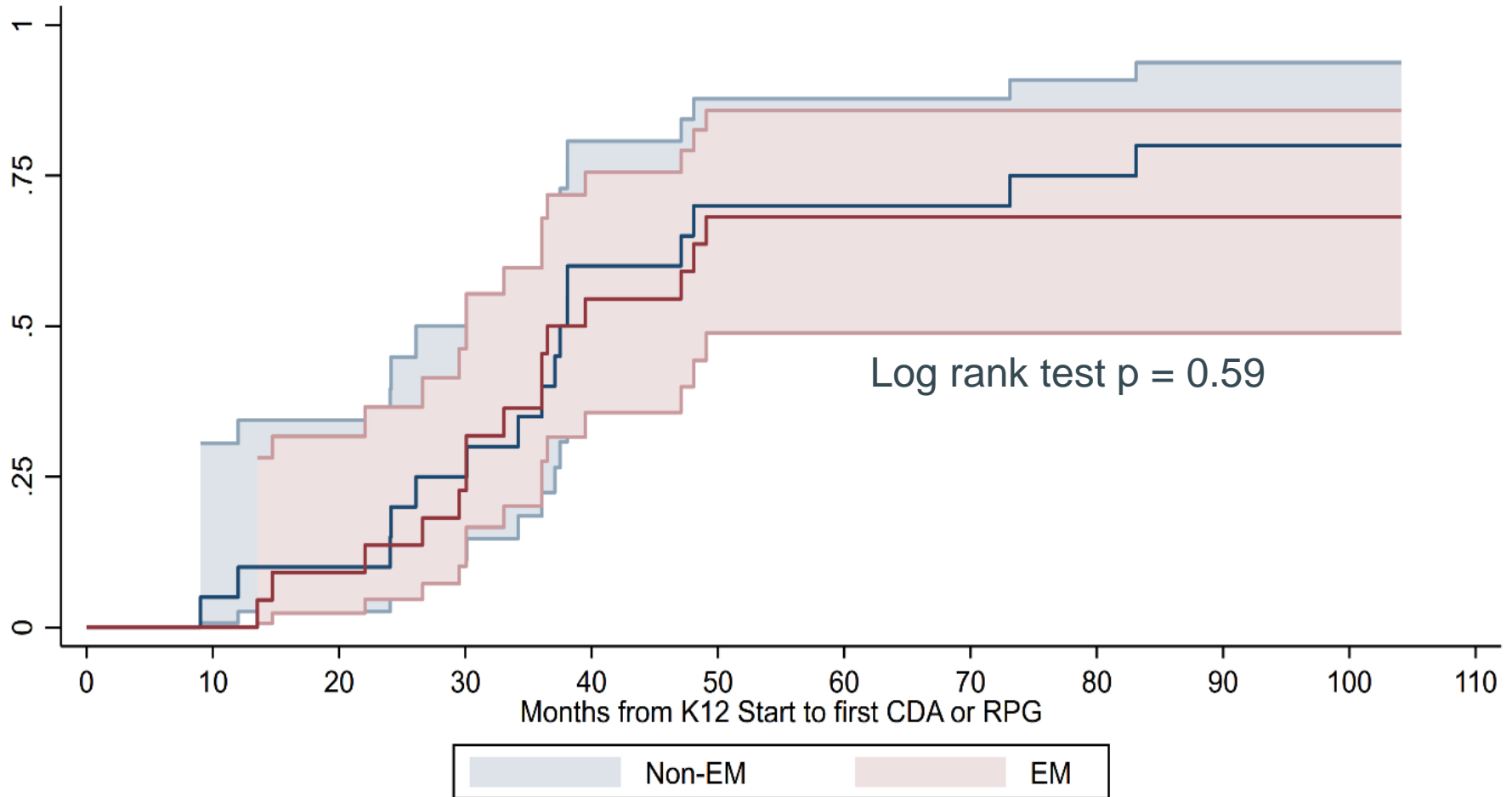
Cynthia D. Morris PhD, MPH, Jennifer N. B. Cook GCPH, Amber Lin MS, Jane D. Scott ScD, MSN, Nathan Kuppermann MD, MPH, Clifton W. Callaway MD, PhD, Donald M. Yealy MD, Robert A. Lowe MD, MPH, Lynne D. Richardson MD, Stephen Kimmel MD, MSCE, James F. Holmes MD, MPH, Sean Collins MD, MS, Lance B. Becker MD, Alan B. Storrow MD, Harrison J. Newgard BS, Jill Baren MD, MS, MBA, Craig D. Newgard MD, MPH  ... See fewer authors ^

- 43 scholars, 6 sites
- Median follow-up = 7.7 years (range 5.7-8.7 years)
- 32 of 43 (74%) awarded a CDA or RPG

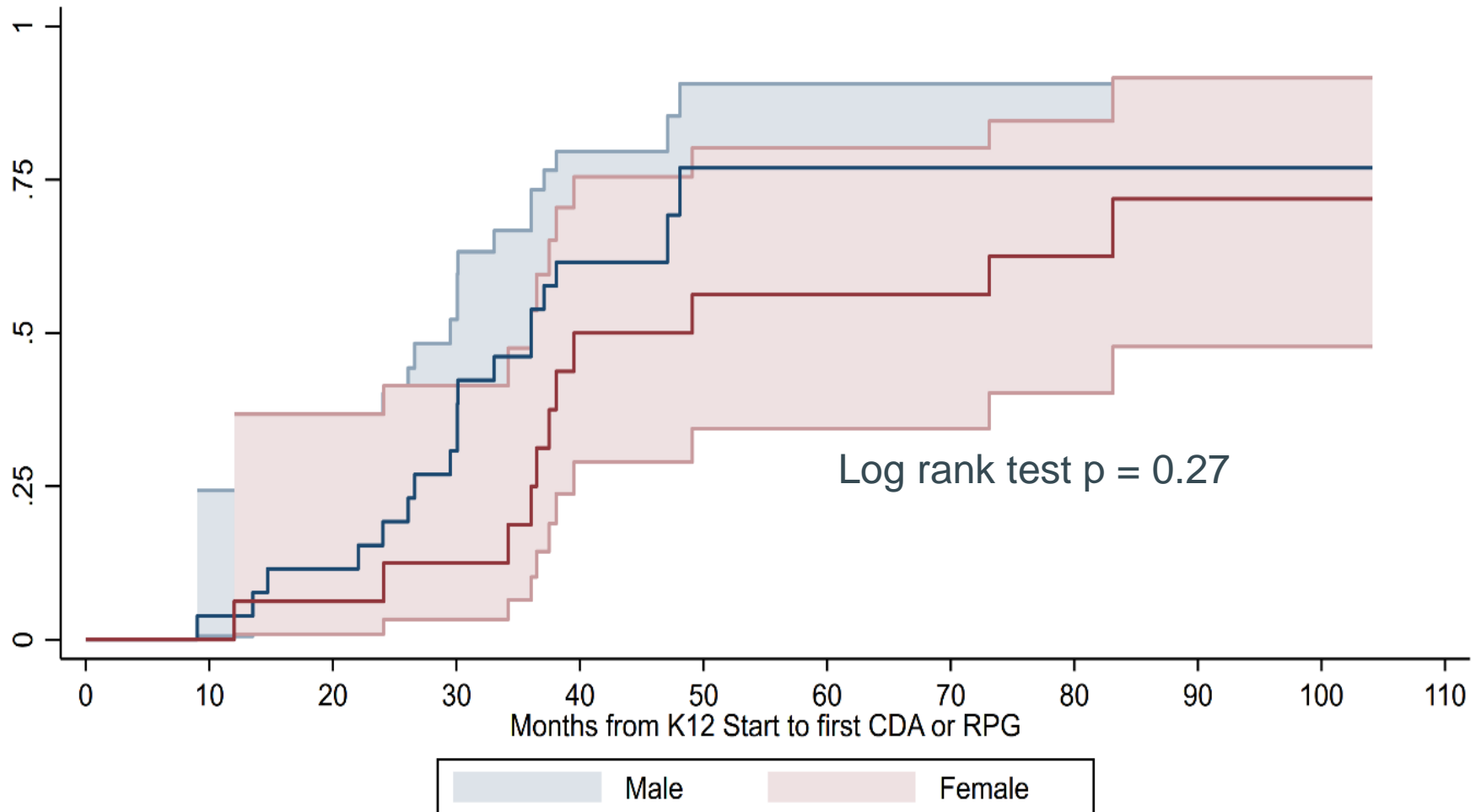
# Time to first CDA or RPG award as PI



# Time to grant by specialty



# Time to grant by gender



# Summary

- It is possible to build a pipeline of highly productive and successful inter-disciplinary scientists
- The K12 ECR experience may provide a useful case study (and data) to support a similar effort for pediatric disaster scientists



Thank You