

Guidelines for CPHAR Mentors in the Evaluation of Fellows (May 2006)

All fellows, at the predoc and postdoc level, receive ongoing evaluation from their CPHAR mentor committees and through their attendance and participation at CPHAR weekly seminars and bi-weekly Research in Progress seminars. Indeed, much of the activity in the latter consists of explicit critique of draft papers and workshopping paper and poster presentations or 'job talks'.

In addition, the CPHAR mentor and all other members of the fellow's mentor team should formally review the fellow twice annually. In the case of fellows in their first year of funding, the second such review should lead to a recommendation as to whether the fellow should continue to be supported by the program. This recommendation is conveyed in writing (e-mail is acceptable), along with the fellow's progress report and a brief note from the lead mentor, to the program director. It will then be reviewed by the CPHAR executive committee, which will determine whether funding, or remedial action, is to be provided.

The review should take into account the fellow's research plan and any amendments thereto, as well as the extent to which, in the view of the mentor team, the fellow is realizing desired program outlines. Below is a list of desired outcomes for the predoctoral and postdoctoral fellows in our program. This list is taken from the CPHAR proposal for funding.

The desired *outcomes* for the *predoctoral* training program are that the trainees upon completion of the training program will demonstrate competence in:

1. Using and developing appropriate theories relevant to health and health care issues among older adults;
2. Incorporating both a disciplinary and an interdisciplinary perspective into aging and health research;
3. Analyzing the congruence between research problem, method, and outcome, using theoretical and empirical resources;
4. Designing research addressing important issues in health care and aging;
5. Developing and using appropriate measurements in health and aging research;
6. Using research protocols (including data collection, interventions when appropriate, and analysis techniques);
7. Presenting scientific findings in different formats, including papers, posters, and publications;
8. Learning and committing to responsible conduct of research and knowing the ethical issues in the conduct of health and aging research with human subjects;
9. Applying a knowledge of diversity issues in health and aging.

Desired *outcomes* from *postdoctoral* training incorporate all nine of the above objectives, but move to a higher level of complexity. By completion of the program, the postdoctoral fellow should be able to demonstrate competence in the above nine areas but also in:

1. Analyzing research design issues from several perspectives, e.g. bio-behavioral, social, physiological, etc.;
2. Synthesizing theoretical and empirical support from at least two disciplines in addressing a problem involving health or health care and aging;
3. Generating a complex or innovative conceptualization to address a concern for health or health care utilization of older adults;
4. Applying an interdisciplinary orientation in the design of research using a theory-based approach;
5. Collecting data (including secondary analysis), implementing protocols, and using appropriate advanced analysis techniques;
6. Reporting scientific findings for publication and preparing research proposals for extramural funding.