Individual Development Plans for NIH-supported Trainees

Posted on July 23, 2013 by Sally Rockey

We continue to make progress on implementing the recommendations proposed by the Advisory Committee to the NIH Director (ACD) working group which studied the biomedical research workforce. We have just posted a Notice in the NIH Guide for Grants and Contracts announcing that NIH encourages grantees to develop an institutional policy requiring an Individual Development Plan (IDP) for every graduate student and postdoc supported by any NIH grant, regardless of the type of NIH grant that is used for support. We have gone further by encouraging grantee institutions to describe the use of the IDP in the Research Performance Progress report (RPPR) for all projects reporting graduate student and/or postdoctoral researchers. Instructions for reporting IDPs in the RPPR will be available on October 18, 2013, but we understand that it will take time to develop and implement IDP policies. So, we are encouraging institutions to begin reporting IDPs in the RPPR by October 1, 2014. Institutions that have institutional IDP policies already in place are encouraged to begin reporting as soon as possible after instructions appear in the RPPR.

We do not expect to collect the actual IDPs as we are asking our grantee institutions to put in place the type of IDP that works for their students and postdocs and their internal administrative systems. While this is an expectation on our part and not a requirement, we are following the community’s lead fostering early engagement in career planning for our talented workforce.

To give you an idea of how this all came about, the ACD working group recommended establishing IDPs for postdocs receiving any form of NIH support (individual fellowships, support off an R01, etc.). We felt that graduate students also would benefit from developing IDPs with their mentors so decided to expand implementation of this recommendation to include both groups (as described in the plan I presented to the ACD in December).

In addition, we posted a Request for Information (RFI) seeking input on several of the recommendations including the one calling for IDPs. The commenters nearly unanimously agreed with the implementation plan and thought that IDPs should be used to assist in tailoring individual training as part of the overall mentoring process. Many stressed that active and engaged faculty participation is essential for IDPs to be effective.

I agree with the commenters completely. IDPs are a useful tool to help graduate students and postdocs identify their career goals and what they need to accomplish to achieve those goals. Perhaps more importantly, the IDP process can facilitate communication between faculty mentors and their trainees. However, IDPs will be meaningful only if mentors and mentees make full use of their potential as career development tools. My hope is that institutions and faculty will join NIH as full partners in the effort to better prepare graduate students and postdocs for their chosen careers, and that IDPs will be embraced by faculty as an important component of career preparation for the next generations of biomedical researchers. We plan on monitoring the outcome of this effort, so stayed tuned for more on the subject as this unfolds.

This entry was posted in Rock Talk and tagged Biomedical Workforce, Grants policy, IDP by Sally Rockey. Bookmark the permalink.

26 THOUGHTS ON “INDIVIDUAL DEVELOPMENT PLANS FOR NIH-SUPPORTED TRAINEES”

IDP on my mind

on July 23, 2013 at 4:43 pm said:

Will the NIH consider any other career goal besides biomedical researcher as an acceptable career goal for an IDP? The biomedical workforce report highlighted