Long-term Collaboration Plans
We recommend a collaboration plan in which the TCI Biostatistics Shared Facility and the collaborating basic science laboratories, clinical or population science units use their departmental/divisional operational funds or clinical revenues to support time for a specific team of biostatisticians to be involved in developing research programs in these facilities.

What does this plan provide?

- Data analysis for all existing projects
- Study and experimental design for all projects
- Assistance with all manuscripts
- Priority work on grant proposals from this group
- Assistance with journal clubs and paper review (from methodology perspective)
- Assistance with research conferences (e.g., data analysis and pre-conference critiques of fellows' presentations)
- Assistance with identification of research gaps to be able to initiate research
- Teaching short courses in experimental design and analysis methodology catering to the particular disease system
- K award mentoring

How does it work?

- **Internal Long-Term Collaborations:**
The collaborating department/division at Mount Sinai reimburses the Biostatistics Shared Resource Facility for a part of the percent effort plus fringe of the team of biostatisticians (PhD and/or MS) and/or epidemiologists dedicated to the learning of the subject matter and initiation of projects of their research interest. A mutually agreed upon budget is developed before the collaboration is begun, and the effectiveness of the collaboration is tracked and a possible increase or decrease of the budget is discussed yearly. Semiannual or annual invoices along with reports on work activities are sent for reimbursement. If % FTE model is not suitable, short-term consultation at a rate of $125/hour is available. However, the latter is not preferred due to the administrative burden of invoicing and collecting.

We suggest the guidelines in the following table as a starting point for budgetary discussions with the % FTE provided by the collaborating department/division matched by the TCI-CCSG grant.

<table>
<thead>
<tr>
<th>% Supported by PI</th>
<th>% Supported by TCI-CCSG</th>
<th>% Biostatistician’s Protected Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>15%</td>
<td>5%</td>
<td>1 day (20%)</td>
</tr>
<tr>
<td>30%</td>
<td>10%</td>
<td>2 days (40%)</td>
</tr>
<tr>
<td>45%</td>
<td>15%</td>
<td>3 days (60%)</td>
</tr>
<tr>
<td>60%</td>
<td>20%</td>
<td>4 days (80%)</td>
</tr>
<tr>
<td>75%</td>
<td>25%</td>
<td>5 days (100%)</td>
</tr>
</tbody>
</table>

- **Long-Term Collaborations with other MSHS hospitals (MSQ, BI, MS-West, MS-Brooklyn):**
  Above model is available without the matching part from TCI-CCSG. If % FTE model is not suitable, short-term consultation at a rate of $125/hour is available. Quarterly invoices along with reports on work activities are sent for reimbursement

- **How to take part in this plan:**

Please email Dr. Mazumdar at madhu.mazumdar@mountsinai.org with an assessment of your needs. Please include how many faculty and staff members will need support and the type of projects (protocol development, manuscript writing, grant development, journal club, and training/mentoring activities) you will need help with.

(Modeled after http://biostat.mc.vanderbilt.edu/twiki/bin/view/Main/ManuscriptPolicies)
Policies for Manuscript Writing (Under this Plan)

Authorship

A frequently asked question is whether biostatistical consultants should be co-authors on scientific papers. **We feel that decisions about authorship should be independent of consideration of funding sources.** As recommended in published guidelines (Parker RA, Berman NG: Criteria for authorship for statisticians in medical papers. Statistics in Medicine 17: 2289-2299 (1998)), "The basis of financial support should be the time/effort spent on a project and the basis for authorship should be whether the statistician has made a scientific contribution to the project." Examples of scientific contributions are the following.

1. The statistician has to develop new statistical methods to meet the project's needs, or she/he has to combine existing techniques in a novel way.
2. The statistician has a major role in designing the study.
3. The statistician writes part of the manuscript other than a standard paragraph or two describing which statistical methods were used.
4. The statistician is asked to critique an initial draft and the statistician spends a considerable amount of time suggesting alternative wording and presentation of results.
5. The statistician provides data analysis along with interpretation of results.

By JAMA's criteria for authorship for statistical experts involved in the analysis and interpretation of data used in a manuscript; a statistician is a co-author if (1) he/she took part in the drafting of the manuscript or (2) he/she was involved in a critical revision of the manuscript for important intellectual content.

Above all, it is important for the medical researcher and biostatistician(s) working on the project to agree on criteria for authorship early in their collaboration.

Manuscript Preparation

Whether or not the statistician is an author, it is important to allow sufficient time for the statistician to check statistical results and descriptions of statistical methods that appear in a manuscript. We frequently find inconsistencies between analyses we perform and basic descriptive statistics computed by the investigator. For example, the primary statistical comparison may emphasize differences in medians while the investigator quotes mean values elsewhere in the manuscript. When different analyses are carried out by different personnel, it is beneficial for the investigator and statistician to map out the entire analysis together in advance.