Background: The NIH Roadmap Initiative emphasizes interdisciplinary research and translation of discoveries “from the bench to the bedside.” Traditionally, graduate training programs in various schools, departments and divisions have designed individual activities to fill their local research needs but have not typically been unified or have brought together multiple disciplines.

Objective: To develop an institutional structure that can provide better integration of the existing training programs, improve efficiencies of operations, promote multidisciplinary collaboration across departments and health sciences schools, and provide a central location and infrastructure where rigorous multidisciplinary clinical and translational research teaching and mentoring can occur.

Methods: In 2005, the Dean of the Schools of the Health Sciences created the Institute for Clinical Research Education (ICRE). We brought a number of training programs together as part of the ICRE, including: the Clinical Research Training Program (funded by a K30 grant from NIH); the Clinical Scientist Training Program (offering a 5 year MD/MSc in Clinical Research for Medical Students); the International Clinical Research Training Program (offering clinical research training for international investigators); the NIH Collaborative Program (providing training opportunities for clinical NIH fellows); the Clinical Educator Training Program (providing MSc in Medical Education for future leaders in medical education); and the K12 Multidisciplinary Clinical Research Scholars Program (a Roadmap Initiative for career development awards for multidisciplinary research funded through NIH). An important feature of the ICRE was to develop a single institutional structure for these programs in a single physical space. The ICRE has a dedicated 12,000 sq ft space with Smart classrooms, conference rooms (with Smart Boards), a state-of-the-art computer laboratory, faculty offices, staff space, and 30 cubicles for trainees.

Results: The Institute provides training and education in clinical research of the highest caliber to all levels of trainees in the Schools of the Health Sciences; enhances collaboration and cooperation among clinical research trainees and researchers from multiple disciplines, departments, and schools; and expands training opportunities in clinical research for clinicians and post-doctoral students during early phases of their academic careers. This facility allows for effective coordination of programs and mentoring through the close proximity of program staff and faculty. The organizational structure promotes cohesion and opportunities for multidisciplinary collaboration. The coordination of clinical research training has provided didactic support for numerous T-32, F-32, K-08, K-23, and K-25 awards throughout the schools of the health sciences. The single physical space has increased the cost-effectiveness of all of the training programs by eliminating redundancies and stream-lining processes.

Conclusions: The establishment of a non-departmentally based, multidisciplinary structure to house and support clinical and translational training programs across multiple schools and departments has enriched the training experiences for faculty and trainees and has allowed us to develop programs and activities that would be difficult to establish in the traditional academic center environment.