



Boston Public Health Commission I³ Accelerator: Frequently Asked Questions

Program Structure & Model

What is the I³ Accelerator?

A challenge-based program that pairs Accelerator Fellows and Advisors with BPHC staff to build AI and data science tools against public health priorities the Commission has defined. Teams work directly with BPHC subject matter experts rather than in a research vacuum.

How long does a project run?

Applicants propose their own project period and milestones. The maximum project period will be 12 weeks, but may include the option to extend. We expect most focused pilots or prototypes to run 8 to 12 weeks, and longer projects are welcome when the scope warrants it (e.g., semester long projects).

Is this only for students, or can others get involved?

You do not need to be currently enrolled at an institution to propose or work on a solution. What matters is the role you'll play, not your enrollment status:

- **Accelerator Fellows** are the people actively doing the work — building the product, tool, or workflow improvement. Fellows come on through an internship-style HR mechanism as BPHC employees for a defined project period, at roughly 10 hours a week, and are paid an hourly rate.
- **Advisors** provide expertise and guidance rather than doing the hands-on build. Anyone with relevant expertise can serve as an advisor — this includes faculty, but also industry professionals (for example, someone at a startup) or other subject matter experts. Advisors are not required to be affiliated with an academic institution.

What AI innovation topics should applications focus on?

Applicants have two pathways: (1) respond to a problem or opportunity on the BPHC Project Wishlist, or (2) propose an entirely new idea that addresses a BPHC-relevant public health problem, unmet need, missing insight, inefficient process, or opportunity that BPHC may not yet have identified. Both pathways use the same application and review process.

What will be included in the BPHC Project Wishlist?

Wishlist entries will vary in specificity. Some may describe a specific problem and an anticipated AI approach; others may identify a higher-level need without prescribing the technical solution. The goal is to give applicants enough context to understand the operational problem while leaving room for teams to bring their own technical expertise and ideas.

What information will a Wishlist entry provide?

Where known, entries will describe:

- the public health problem, gap, or operational need;
- the current pain point—for example, a missing insight, time-consuming task, or inefficient process;
- what success would look like and the insight or efficiency BPHC hopes to gain;
- anticipated inputs or data sources; and
- at least one BPHC unit that has committed to being available approximately weekly to help inform and guide the project.

Eligibility, Teams & Matching

Can a project be a single student, or does it have to be a team?

Either. Projects can involve one or more students working together with one or more named faculty advisor. Individuals or teams will work with BPHC subject matter experts to assess whether outputs are interpretable, whether the data lines up with what you'd expect from a conceptual framework, and what's still missing. The goal is to avoid a strong idea that stalls because no one on the team can take it from concept to a working product.

How many teams/projects will be accepted?

BPHC is planning for a minimum of three funded projects in the January cohort, with room for more depending on the quality of applications received and total available funding. That minimum is built from current funding plus additional funding streams, including some

partner teams that already have funding for their own postdoc and are looking for a BPHC problem and dataset to apply it to.

What criteria will BPHC use to decide which proposals get funded?

All proposals, whether they respond to the Project Wishlist or bring a new idea, go through the same application and review. Review criteria go beyond the quality of the proposed solution. BPHC is also weighing whether a dedicated BPHC subject matter expert has the capacity to support the project, and how heavy a lift the proposed solution actually is — for example, whether it can be built with existing tools, versus requiring a full backend build. A strong idea still needs a feasible match on the BPHC side.

Will BPHC or the Accelerator match specific public health teams with AI labs or researchers? A proposal needs to come from an assembled team — BPHC is not running ongoing matchmaking after a proposal is submitted. That said, BPHC makes itself available to help people think through their proposal and make connections during the application window, from October 15 to November 5, through drop-in office hours. If you're a public health practitioner without an existing academic connection, sign up for office hours during that window.

Can students from different institutions form a team together?

Yes — cross-institutional collaboration is welcome, and BPHC is not opposed to students from different schools working together on the same project.

Will the Accelerator actively matchmake students across institutions?

No. The Accelerator is not anticipating running matchmaking across student groups from different institutions; that coordination is expected to happen at the institution level.

Practicum, Employment & Data Access

How is this different from a standard practicum?

Unlike a typical practicum, where a student is placed as general support within a single bureau's day-to-day work, an Accelerator project is built around one specific challenge. Teams work on that defined problem alongside BPHC subject matter experts, rather than functioning as internal staff for one bureau.

What are the legal and employment terms — do I need a Data Use Agreement (DUA)?

The Accelerator does not use Data Use Agreements (DUAs) or provide data directly to universities — a different path than most academic partnerships take. Instead, team members doing the hands-on work are hired as BPHC Fellows for the duration of the

project and are legally bound by BPHC employee policies covering HIPAA, conflicts of interest, privacy, and data dissemination or publication requirements. Fellows go through BPHC's own onboarding process, and can be paid either by BPHC or through external funding streams (for example, a home institution's stipend program). This is a different legal relationship than a typical academic practicum.

Does my institution's existing practicum, co-op, or capstone structure fit this model?

BPHC is actively gathering this information from partners rather than prescribing one path. If your institution already has a practicum, co-op, action lab, capstone, or fellows structure that could host a pilot, BPHC wants to hear about it — along with that structure's enrollment and timing cycle — so the Accelerator's calendar can work with existing academic mechanisms rather than around them.

Data & Technical Readiness

Is there a standard "data readiness" review before a project starts?

Not yet formalized as a review step. Instead, BPHC's plan is to pair its Project Wishlist (the list of Commission challenges) with example data sources so partners can see which data might support which kind of idea when choosing what to propose. BPHC will publish an initial Wishlist when the call opens on October 15 and will keep adding to it through the fall as staff identify new needs. In the meantime, expect that data readiness varies by project and by source. Office hours are a good place to ask about data for a specific idea. For funded projects, data access is confirmed during project refinement in December.

Is there interest in projects that compare or validate data sources against each other?

Yes — one example raised was validating syndromic surveillance signals against confirmed-diagnosis data, an area with clear noise and real hypothesis-testing potential.

What protected health data can Faculty/SME advisors to the fellows/student groups view or access in this pilot?

Advisors cannot access line level data or view PHI without BPHC consent and without signing additional agreements. BPHC shall make the final determination on who has access to BPHC data and what steps may be required to access that data. Depending on the project goals and the data sources involved, project team members (and their advisors, if applicable) may have access to sensitive or confidential data, including HIPAA-covered protected health information (PHI), confidential personally identifiable information (PII), or other data subject to state/federal law or BPHC's own internal policies. Project team members may be required to sign confidentiality agreements or undergo

additional training, depending on the sensitivity of the data that they will or may have access to.

Team members who will only have access to publicly available information, aggregate information, or de-identified data may not be required to sign additional confidentiality agreements or undergo additional training.

Timeline & Decision Process

What are the key dates?

The current draft timeline is:

- **October 15:** Call for proposals opens, along with an initial BPHC Project Wishlist
- **October 15 – November 5:** interested parties may get application questions answered via an optional interest form and/or drop-in office hours
- **November 6:** Final proposals due
- **November:** BPHC reviews proposals and matches projects with BPHC staff
- **Late November / early December:** Funding decisions communicated
- **December:** Project refinement, plus contracting, data, security, onboarding, and access steps as needed
- **Mid-January:** Launch a full Accelerator cohort
- **Spring:** Project work and deliverables

When will BPHC decide which proposals get funded for the January cohort?

Final proposals are due November 6. BPHC will review proposals in November and communicate funding decisions in late November or early December.

Can we request an extension?

Teams with legitimate timing constraints may request an extension of the November 6 deadline. Extensions are not guaranteed, and the overall review timeline will not change.

If my team already has a pilot idea, can we start talking to BPHC before submitting a proposal?

Yes — teams with a project idea are encouraged to have an early, informal discussion before a formal submission. Once the call opens on October 15, you can sign up for drop-

in office hours and share your idea through the optional interest form. Neither step is required to submit a proposal.

Do I need a named BPHC sponsor before I apply?

No. Wishlist entries will identify relevant BPHC units where possible, and BPHC can help connect applicants with appropriate staff during the application period. Applicants proposing a new idea do not need to arrive with an existing BPHC relationship.

How Pilot Ideas Get Submitted

- **Do I need a fully scoped project to submit an idea?**

No.: There is one required step, the final proposal, and two optional forms of support during the application window (October 15 – November): **Interest form (optional)** a short description of your idea (about a paragraph, or the equivalent of a five-minute pitch) that helps BPHC bring the right staff experts into the conversation. None of this needs to be finalized.

- **Office hours (optional):** drop-in sessions, booked in advance, where you can bring questions or a proposed idea and talk it through with BPHC staff to refine the problem, discuss data, and test feasibility.
- **Final proposal (required):** a more detailed proposal, due November 6th.

The interest form and office hours are for feedback and project refinement. They are not a screening step, and you do not need to use either one to submit a final proposal.

Do I have to choose a project from the Wishlist?

No. There are two pathways, and both use the same application and review: (1) respond to one of the problems or opportunities on the BPHC Project Wishlist, or (2) bring your own idea for a project relevant to BPHC and the goals of the Accelerator. Many Wishlist items will have a named BPHC content expert. If yours does not, or you bring your own idea, you do not need a named BPHC contact to apply; BPHC will look for a staff expert with the capacity to support the project during review.

Applicants proposing a non-wishlist idea are encouraged to use the optional drop in office hours to have questions around value to BPHC, data availability, and feasibility answered by BPHC staff during the optional scoping period.

What kinds of projects is BPHC looking for? A few examples raised as starting points: extracting signal from unstructured text (for example, syndromic surveillance notes), generative AI-assisted data visualization to speed up equity reporting, sub-zipcode Social Determinants of Health equity profiles, AI/ML forecasting models for infectious disease or substance use disorder trends, and analysis of community feedback such as 311 calls or CHNA interviews. BPHC is also open to ideas outside this list — if you see a solution the Commission doesn't yet know it needs, bring it. BPHC will publish an initial Project Wishlist when the call opens on October 15 and will keep adding to it through the fall.

If you're not sure your idea "counts," it's worth knowing that AI use cases run on a spectrum, and a project doesn't need to be a predictive model to be valuable. On the simpler end: drafting help, summarizing, cleaning up code, extracting data from documents, automating a repetitive task, or acting as a second pair of eyes on a QA pass. On the more advanced end: prediction and simulation. Both ends are legitimate proposals — a good rule of thumb is to start from a specific, tactical pain point (a folder of hundreds of documents that all need to be opened and sorted by hand, for example) rather than assuming you need a sophisticated model to have something worth proposing.

Are there lighter-weight ways to get involved besides a full Fellow-led project? Yes. Not every wish-list item needs a dedicated Fellow and team. For needs that are more about building staff skills than building a custom tool, BPHC is also planning workshop- or cohort-based trainings — for example, with an academic partner's ethical AI division — as a lighter-weight complement to the Accelerator model. If your team's need is closer to "help BPHC learn to do this themselves" than "build this for BPHC," mention that when you reach out; it may be a better fit for a workshop than a full proposal.

What's the benefit of participating? For Fellows (whether students, postdocs, or otherwise): funded, applied-learning work on real public health problems and complex public health data, alongside BPHC practitioners rather than in a research vacuum. For Advisors, faculty, and institutions: a chance to move promising research into real-world public health practice, help shape Boston's public interest AI agenda, and build new cross-institutional partnerships and funding pathways.

Cross-Institution & Collaboration

Is BPHC open to projects that span multiple institutions?

Yes, cross-institutional collaboration is welcome and encouraged — including students from different schools working on the same project team.

Does BPHC handle logistics between institutions (contracts, credit, scheduling)?

No — the Accelerator relies on the institutions themselves to manage that coordination; BPHC is not running matchmaking or logistics across schools

Getting Involved Now

How do I express interest or submit an idea right now?

Reach out to Sanouri Ursprung (sursprung@bphc.org) or Erika Gaitan (egaitan@hria.org) directly, or use the [I³ Collaborative interest form](#) to get on the list.