



CTSA Clinical & Translational
Science Awards Program

Clinical and Translational Science Pilot Module

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MODULE GOALS

- Stimulate and promote new translational research, new research collaborations, and novel projects that address barriers to adoption and implementation, through innovative teams capable of interacting across disciplines, institutions, and the community at large.
- Transition Annual Pilot Program to target research further along the translational continuum, focusing more on D&I research (see FOA).
- Work with Community and Collaboration to create a Pilot Pipeline to assist investigators earlier in the process.
- Work with Resources and Services to improve inter-institutional collaborations agreement to streamline citywide studies and initiatives
- Help to develop a community research resource core to support community-based research, which can also be tapped for core utilization grants.
- Identify sponsorship and/or collaboration from the public and private sector to enhance training, community involvement, and sustainability using the principles of D&I.



From the FOA

Each CTSA hub is required to engage in Dissemination and Implementation (D&I) activities to support innovative approaches to identifying, understanding, and developing strategies for overcoming barriers to the adoption, adaptation, integration, scale-up and sustainability of **evidence-based interventions, tools, policies, and guidelines**. Information, tools and interventions deemed efficacious within clinical or community-based trials need to be made readily available for adoption and implementation. Methods to promote the adoption and integration of evidence-based practices, interventions, and policies into routine health care and public health settings to improve the impact on population health are needed.....

The CTSA consortium is poised to solve these translational science problems that no one hub can solve alone or disseminate a solution to a translational science problem developed at one hub to other hubs. Robustness will be tested in different hub environments and structures and adaptations made for further dissemination within and outside the CTSA consortium, if appropriate. **Each hub is expected to have a plan for building and disseminating an evidence base for each CTS science endeavor, including Pilot projects (Element D) and CTS Research Program (Element E).** Each hub is expected to leverage the HLTs, coordinating centers, CTSA funding opportunities, and governance structures of the CTSA Program to engage in D&I activities. Foundational capabilities and activities in the area of D&I are required to support and enhance the impact of the CTSA hub. *While hubs are expected to innovate in this area, an extensive research program in this area is not required.*



Dissemination and Implementation Science (D&I) and the CTSC

- Translation is the process of turning observations in the laboratory, clinic and community into interventions that improve the health of individuals and the public — from diagnostics and therapeutics to medical procedures and behavioral changes.
- **Dissemination and implementation science** seeks to better link the right interventions, at the right time, in the right place.
- It acknowledges that discovery, efficacy, and effectiveness research is important, but may not result in widespread integration of evidence-based interventions into clinical, community, and policy settings.

NIH Definition of D&I Research

- **Implementation science** - the scientific study of the use of strategies to adopt, adapt, integrate, and scale evidence-based health interventions into clinical and community settings to improve individual outcomes and benefit population health.
- **Dissemination science** - the scientific study of targeted distribution of information and intervention materials to a specific public health or clinical practice audience. The intent is to understand how best to communicate and integrate knowledge and the associated evidence-based interventions.

PLANS TO ACHIEVE GOALS

- Transition Pilot Program to target more research further along the translational continuum, focusing more on D&I research
 - Require applicants to include 2 or more institutions AND at least one clinical or community partners
 - Encourage hospitals to expand their QI projects to involve more than one institution
 - Patient-based projects will be sought that link basic and applied clinical and behavioral researcher P2P to human health risk or illness in the community.
 - Develop an advisory board consisting of both community and clinical partners.
 - Build a cadre of reviewers with broad-based D&I research expertise
- Work with Community and Collaboration to create a Pilot Pipeline to assist investigators earlier in the process.
 - Pilot Concierge; checklist, connect to Resources & Services earlier than later
 - Know where the large community collaboratives exist – encourage them to apply.
 - Projects identified by the community will be identified through stakeholder groups would address health, health disparities and inequities, and access to medical care regardless of health care providers or hospital affiliation.



PLANS TO ACHIEVE GOALS

- Work with Resources and Services to improve inter-institutional collaborations agreement to streamline citywide studies and initiatives
 - A sub-aim of Resources & Services Module is to tackle this
 - Improve credentialing process at institutions
 - Improve IRB process and timeline
- Help to develop a community research resource core to support community-based research, which can also be tapped for core utilization grants.
 - Need a core that is dedicated to data collection in the community setting
 - This is a missing link in our translational work – should be part of Resources and Services.
 - SOP for the hospital resources that are available for community data collection?
 - Needs to be supported by core utilization grant program
- Identify sponsorship and/or collaboration from the public and private sector to enhance training, community involvement, and sustainability using the principles of D&I.
 - Foundation grants may be a natural place for intermediate funding prior to R01s
 - Increases awareness of broader base of follow up funding

OUTCOMES AND METRICS

- Number of pilot application submitted in each phase of translation (T2 and beyond); goal is to see movement towards T3 and T4 projects.
- Number of pilots funded in each phase of translation
- Number of pilots with subsequent funding
- Number of projects with 2 or more institutions AND collaborative partners
- Number of projects with input from an external advisory board
- Evidence of projects leading to changes in practice, guidelines or policies

YEAR 5 PLANS TO FILL GAPS

- Prepare for Yr 1 of next cycle – put call out in Fall 2022
 - Revise the FOA
 - Develop marketing materials
 - Send emails to all D&I researchers across the institutions
- Work with Hub Capacity and C&C to pilot a community-based research methods core for supporting community-based research/data collection (i.e., equipment, best practice measures and protocols, survey development etc).
- Continue to develop infrastructure support for D&I research across all institutions (e.g., identifying champions, training opportunities, annual pilot focus in Yr 5)
- Start conversation with new leads for Resources and Services about inter-institutional processes