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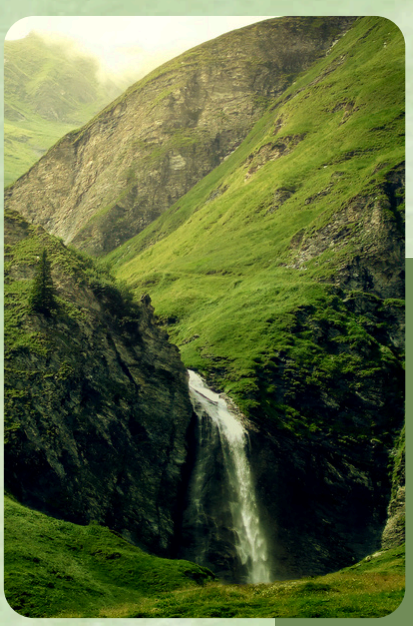
RESEARCH COLLABORATIONS WITH REGIONAL AND COMMUNITY HEALTH SYSTEMS: GUIDE FOR INVESTIGATORS

Why conduct research in regional and community health settings?



Most patients receive care outside university-based medical centers, where most clinical research occurs. This disconnect between where research is conducted and where patients receive care may contribute to the following healthcare inequities:

- Nonrepresentative patient cohorts: Patients may not be representative of the general patient or at-risk populations, making findings less generalizable.
- Exacerbation of health disparities: Patients experiencing health disparities are less likely to enroll in clinical trials and benefit from discoveries.
- Low adoption rates of evidence-based care: Protocols that are not feasible in regional and community health settings may not translate into discoveries that can be implemented in these same settings.

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Key Considerations Before Getting Started

Optimize provider engagement and team collaboration

- Minimize the amount of time providers must spend on study activities (e.g., support IRB submission, create writing committees rather than assign writing tasks).
- Be creative about involving other members of the healthcare team (e.g., medical assistants, social workers, clinic managers) to accomplish study goals.
- Provide ample lead time for critical deadlines (weeks to months rather than days to weeks).
- Scopes of work and budgets should be highly detailed to avoid miscommunication, mismatched expectations, and potential project delays.

Streamline workflows to enhance efficiency

- Create templates for letters of support, budgets, scopes of work, etc. to enable sites to quickly provide grant content.
- Minimize meetings and other requests.

Align research initiatives with health system goals

- Identify and engage research sites that are pertinent to your patient population, such as full-service medical centers for common conditions and specialty clinics for rare diseases.
- Connect the importance of the study with how that supports the health system goals in order to close the gap with existing resources.

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Best Practices Once Research Collaboration Is Underway

Start early! Learn about local processes for study selection, approval, and IRB submission/approval.

- Remember to collaborate within the established systems, respecting the processes in place. As a guest, your cooperation is greatly appreciated.

Provide clear consistent communication, ideally between consistent parties from each collaborating organization. If delays or changes are occurring, communicate these, along with an explanation, an updated timeline and opportunity for discussion. Communication should be open and bidirectional.

Address participant privacy and protection issues early as they may impact your study design and budget

- Health systems often expect their own research personnel to conduct participant-facing study activities
- Local IRB review may be required for unique situations and vulnerable populations

Accommodate clinic operations and clinician schedules

- Adding even a few minutes to patient visits can have significant impacts on the clinic and clinician.
- Schedule meetings in the early morning and evening hours.

Research must pay for itself

- Resources rarely exist to support unfunded activities, such as pre-award development and protocol changes. Include all site expenses in your research budgets (e.g., support personnel, data management, technology).
- Integrate scholarly activities (e.g., manuscript writing, conference attendance) into health system budgets.

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Be a good partner

You will probably conduct many studies throughout your career, and it will save you time and effort to have trusted partners to collaborate across multiple grant cycles.

- **Communicate relevant and timely information**
  - Involve key stakeholders in decisions that impact their organization.

- **Keep to the agreed upon scope of work and budget**
  - Do not expect others to work for free. Be as specific as possible during negotiations (e.g., Where will this study procedure take place? How much time will study procedures take? Who will administer?) and provide regular updates regarding any changes to the scope of work and budget.

- **Define and create a return of results process**
  - Return study results to collaborators in ways they can use (e.g., results reports, town hall-style meetings). Work with your partners to determine what is best for their institution and patients.

- **Take time to understand your partners and their organization**
  - Take time to understand what works and doesn't work in your partners' organizations. Ask questions, be flexible, identify non-modifiable study aspects during initial conversations.

Lastly, consider how collaboration on your study will benefit your partner and how your study has been tailored to meet the specific needs and interests of the regional collaborator. Ideally, the collaboration should aim to improve community health, support scholarship for faculty and trainees, or examine mechanisms to enhance systems.

We can help you

The Institute of Translational Health Sciences has subject matter experts, resources, and research networks to help you develop and conduct high-quality studies, find partners, and learn to be a good collaborator.

Contact Laurie Hassell at lhassell@uw.edu for more information.

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