

to 18 years old. Research trajectories will be developed by assessing chronological research by outcome groups (physical, mental and behavioral, interventions, and biomarkers), study population categories, as well as exposure location and mechanism. Demographic data extracted will be used to assess whether there are disparities in the research conducted to date for this population and if so, in what areas. Research recommendations and clinical implication extracted from references will be used to assess whether more recent research has addressed research from the early post 9/11 years. **DISCUSSION/SIGNIFICANCE:** WTC research strengthens our understanding of 9/11 health effects and provides a way to improve healthcare for the people afflicted from 9/11 exposures. The anticipated results from this scoping review can lead us to identify past research challenges and current knowledge gaps that the Program can address in future research grants.

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### Translational Barriers, Facilitators, and Benefits of Impactful Research on Health Inequities in the Criminal Justice System

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**OBJECTIVES/GOALS:** - Illuminate processes and findings of a translational science case study of impactful research with incarcerated pregnant women and mothers; - Improve our understanding of the translational mechanisms by sharing translational challenges, facilitators, and **METHODS/STUDY POPULATION:** Utilized the following evaluation methods and tools: - The Retrospective Translational Science Case Study protocol to examine translational path from innovation to policy and practice, barriers and facilitators for that translational movement. - Translational Science Benefits Model (TSBM) Checklist for translational/research impact analysis Triangulated diverse data sources: - Primary data: semi-structured interviews with research partners - Secondary data: researchers' grant applications, reports, and publications; public stories/news related to their research; scientific publications; organizational/policy documents; and over 50 interviews with 30 stakeholders featured in published sources. **RESULTS/ANTICIPATED RESULTS:** The research contributed to community and public health, policy/legislative, clinical/medical, and economic benefits, social/institutional change, health equity advocacy, catalyzing research (consequent research studies) and public awareness. Translational research challenges: cultural differences between research and prison system; politics of translating research to policy change; issues of capacity, power, privilege, and opportunity when doing community-engaged research; and science vs. social justice criticism. Facilitators of translation: CTSA support; stakeholder engagement; authentic collaboration; researchers as translation catalysts; and engagement in legislative activities. **DISCUSSION/SIGNIFICANCE:** The evaluation case study provides useful knowledge about translational impact, challenges, and facilitators of community-based research that moved along the translational continuum and contributed to transformational, systemic changes on the legal, clinical, organizational, and interpersonal levels.

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### Using evaluation methods to improve evaluation processes: Creation and implementation of a new continuous improvement process at Duke Univ. Clinical and Translational Science Institute (CTSI)

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**OBJECTIVES/GOALS:** (1) Assess challenges with our current continuous improvement processes via stakeholders. (2) Implement a revised continuous improvement process. (3) Evaluate the revised processes to assess implementation and use for strategic improvement. (4) Implement analysis mechanisms for new process to assess trends across the CTSI. **METHODS/STUDY POPULATION:** We used a mixed-methods, multi-phased, stakeholder-engaged approach with different processes per objective. Obj. 1: We implemented focus groups, surveys, and listening sessions incorporating two populations: both teams required to participate in reporting process, and CTSI leadership. Obj. 2: We utilized data from Obj. 1 processes to develop a revised continuous improvement process. Obj. 3: We integrated qualitative feedback processes onto the structure of continuous improvement processes, and we implemented a survey to assess use and value for the new process. Obj. 4: We developed a qualitative coding schema to assess key trends across teams and over time. **RESULTS/ANTICIPATED RESULTS:** Obj. 1: Numerous challenges in metrics format and process, including significant limitations in data use to inform decision-making and appropriately assess impact. Obj. 2: Resultant changes to continuous improvement processes, including a restructured reporting format and use-oriented approach that enhanced organizational integration; changes included added focus on facilitators of success, challenge, and key opportunities to better inform decision-making. Obj. 3: The majority of teams experienced the new quarterly process as a better tool for program monitoring and communicating program needs to leadership, but that fuller integration into vertical communication is needed. Obj. 4: Implementation of new analysis process enabling examination of trends and themes across diverse teams within the CTSI. **DISCUSSION/SIGNIFICANCE:** This work has particular relevance within ACTS given our focus on a clinical and translational research enterprise, the complexity in evaluating the diverse work of translation research entities, and limitations in a commonly-used metrics-monitoring approach. Our focus on improving translational processes advances translational science.

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### Wouldn't you like to know what your research study participants are thinking? A collaboration for Empowering the Participant Voice

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**OBJECTIVES/GOALS:** Empowering the Participant Voice (EPV) is a Rockefeller-led 6-CTSA consortium that aims to collect research participant feedback through new Research Participant Perception Survey (RPPS)/REDCap infrastructure and data aggregation to a national database. Here we describe diverse Use Cases and launch

dissemination to other hubs. **METHODS/STUDY POPULATION:** The EPV team refined the RPPS-S and developed fielding and data standards, a multi-lingual RPPS/REDCap project XML, At-a-Glance Dashboard, EPV Consortium Database, and Use Cases to align with local initiatives and stakeholder input. Sites ran full thread tests of the infrastructure before launch. To demonstrate RPPS/REDCap, 5 sites implemented Use Cases, surveyed diverse populations via email, patient portal or SMS, and analyzed results using the At-a-Glance Dashboard External module (which provides visual analytics and enables filtering by participant/study characteristics). Sites continue to collect, synthesize and respond to actionable data. To disseminate infrastructure, we will invite early adopters to implement the RPPS/REDCap infrastructure locally, joining the EPV learning collective. **RESULTS/ANTICIPATED RESULTS:** To date, 5 sites surveyed 10,199 research participants, at post-consent or end of study. 2833 (26%) research participants responded, from diverse demographic groups. More than 90% gave the Top Box score response regarding courtesy, respect for cultural background, privacy, and lack of pressure to join a study. Disparities were apparent in the informed consent experience, with a Top Box score range of 38-78% in different demographics. Dissatisfaction with out-of-pocket research costs was a recurring theme. Top Box scores varied for feeling like a valued partner in research (69-93%), would recommend research participation to friends or family (56%-81%), and Overall Experience (64%-90%) questions. Sites identified actionable findings in areas of consent, communication, partnership, and study conduct. **DISCUSSION/SIGNIFICANCE:** The EPV RPPS/REDCap infrastructure enabled sites to broadly collect participant feedback, identify actionable findings and make inter-institutional comparisons. Collaborators are designing local initiatives to increase response rate and diversity, address disparities in research participation experiences, and discover better practices.

## Health Equity and Community Engagement

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### A CTS Team Approach to Adapting an Evidence-Based Mindfulness Tool to Increase Trust of Reproductive Healthcare Providers\*

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**OBJECTIVES/GOALS:** The goals of this study are to 1) adapt a mindfulness-based intervention that supports the development of trust-promoting behaviors of OBGYN providers with patients who identify as Black women based on the input of providers and patients, and 2) assess the feasibility of implementation for OBGYN healthcare providers. **METHODS/STUDY POPULATION:** Goal 1: Focus groups will be conducted with members of the populations of providers and Black women patients in Alachua County, Florida to identify essential intervention content to complement the central component of mindfulness and spiritually based practices. This complementary content will serve to address the institutional and cultural context of the intervention setting. Goal 2: Providers will be recruited to participate in interviews about their perceptions of intervention feasibility. These aspects include recruitment potential, acceptability of the intervention content

and delivery, implementation practicality, identification of appropriate outcomes, and identifying strategies to recruit Black women patients to participate in program evaluation. **RESULTS/ANTICIPATED RESULTS:** Goal 1: We will elicit the perspectives of providers and Black women patients regarding the respective roles and relationship of mindfulness and spirituality to increase trust-promoting behaviors with patients who are Black women. We also anticipate identifying additional content to complement the core intervention components that participants perceive as necessary to develop the knowledge, skills, and behaviors which convey the trustworthiness of providers to patients. Goal 2: We expect to gain key insights into intervention design, implementation, and evaluation feasibility from the perspective of providers. Interview data will be aggregated and qualitatively analyzed for themes pertaining to feasibility. **DISCUSSION/SIGNIFICANCE:** An intervention that builds on mindfulness and spiritual practice is an innovative approach to improving interpersonal outcomes in provider-patient relationships. By investigating the feasibility of such an intervention, we will gain insight into how to design and deliver a program to increase the trust-promoting behaviors of OBGYN providers.

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### A Community Engagement Advisory Board's 22 Years of Contributions to Translational Research

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**OBJECTIVES/GOALS:** CTSIs around the country rely on Community Engagement Advisory Boards (CEABs) to bridge research and communities. The history of this 22-year-old board offers insight on 1) how it was created and has been sustained over time 2) its evolution, and 3) members' views of their contributions to translational research at UIC. **METHODS/STUDY POPULATION:** As founding members began to step down from this long-standing board, we started to document its history and members' narratives and perspectives of the work conducted at UIC since its inception. Using an Oral History methodology, we conducted three virtual focus groups with 13 short and long-term members (n=6, n=4, n=3) to learn about changes within CEAB and in members' roles, and individual semi-structured interviews with three long-standing members to expand on the origin and evolution of CEAB. Focus group data was coded and analyzed. We also extracted data on key events from archived files including grant proposals and CEAB meeting notes. A steering committee of three CEAB members helped guide this process. **RESULTS/ANTICIPATED RESULTS:** The CEAB was founded at the UIC College of Nursing in 2001 under the Center for Research on Cardiovascular Respiratory Health, with a grant from the National Institutes of Nursing Research (NINR). It was established as college-wide advisory board of community experts to help engage underserved communities and to contribute to research beyond recruitment and retention. In 2009, upon receipt of a Clinical Translational Science award that established the Center for Clinical Translational Science (CCTS), the CEAB became a campus-wide board. Over 30 community organizations and many non-affiliated community members have contributed to translational research at UIC throughout the board's history. **DISCUSSION/SIGNIFICANCE:** Over twenty years later, the CEAB continues to help bridge researchers and communities, and to raise awareness about community needs, the importance of cultural relevance, and the inclusion of underserved communities in