

improvement. This initial phase of the program evaluation was conducted in the Summer of 2023. The results were used to inform an expansion of the program to include more staff in the the Fall of 2023. Pre- and post-program surveys of the participants were conducted and interviews with each program participant were conducted. Finally, interviews with non-participating staff were conducted to assess their need for writing support and the challenges and facilitators of their scientific writing. RESULTS/ANTICIPATED RESULTS: Preliminary evaluation results obtained in the summer of 2023 were positive. All participants completed the course, and spent an average of 3.3 hours working between sessions. Six manuscripts were developed, five of which are being readied for submission and one submitted as of August 2023. Analysis of the pre-and post-program surveys indicated that all participants gained writing skill and authorship knowledge. Specifically, they gained confidence in 7 writing skills and 6 first-author roles evaluated during the course. All participants were satisfied with their experience and recommended the course to their colleagues, and the course instructor was also satisfied with the course. However, the participants noted that competing work demands and variable preparation hindered their work in the course. DISCUSSION/SIGNIFICANCE: With the increasing focus on Clinical and Translational Science taking place across the CTSA Consortium it is important to involve research staff in paper writing teams, including in first-author roles. Professional development in scientific writing can support Clinical and Translational Research staff contributing to this emerging science.

186

### **Variances in Implementation Fidelity of a Play Promotion Program among Diverse Language Families: An Observational Analysis of a Multi-Site Case Study**

Shelby Anderson-Badbade, May Oo, Peyton Rogers, Lynsey Grzejszczak and Rebecca L. Emery Tavernier  
Weitzman Institute

OBJECTIVES/GOALS: Research emphasizes the importance of play in early childhood to support social, emotional, and physical development. This study explores how the Prescription for Play (P4P) is executed in clinical contexts by analyzing implementation fidelity and contextualizing the adaptations, challenges, and facilitators to the program's functionality. METHODS/STUDY POPULATION: This project is an ongoing multi-site case study. At the time of study completion in December of 2023, there will be over 40 clinical observations of pediatric well-child check (WCC) visits completed across 7 Federally Qualified Health Centers (FQHC) participating P4P, a play promotion program wherein providers discuss the importance of play in WCC visits and provide a free play kit. All visits are with children 18-36 months old, with a broad demographic spread across sites. Observations are recorded through a guided observation protocol informed by a standard implementation fidelity framework, conducted by 5 researchers. Through inductive thematic analysis, this study will analyze observations of WCC visits to understand the ways providers engage with P4P across sociocultural contexts within FQHCs. RESULTS/ANTICIPATED RESULTS: Preliminary analysis of clinic observations (N = 30) indicates the degree of implementation fidelity varies

across sites, with particular variances between WCC visits conducted in English versus non-English languages (NEL). In NEL visits, there were discrepancies among indicators of quality of delivery and participant responsiveness. NEL visits were less likely to have the provider model play with the caregiver and far less likely to open the play kit given to the family. Providers in NEL visits were also less likely to discuss certain benefits of play like brain development and reduced screen time. Across all observations, providers "prescribed play" approximately half the time. As more observations are conducted, researchers anticipate seeing continued differences between English and NEL visits. DISCUSSION/SIGNIFICANCE: From preliminary analysis, discrepancies in implementation fidelity indicate the P4P intervention may require adaptation and additional training related to how to prescribe and discuss play in WCC visits conducted in NEL visits. Additionally, this study elucidates the impact language can have on the fidelity of clinical interventions.

187

### **Translating for Impact: a free online toolkit for demonstrating the larger impact of your work**

Mia LaBrier<sup>1,2</sup>, Stephanie Andersen<sup>1</sup>, Julie Heidbreder<sup>1</sup>, Laura Brossart<sup>1</sup>, Todd Combs<sup>1</sup> and Douglas Luke<sup>1</sup>

<sup>1</sup>Washington University in St. Louis and <sup>2</sup>Center for Public Health Systems Science, St. Louis, MO

OBJECTIVES/GOALS: The Translational Science Benefits Model offers an approach for evaluating the downstream health and social impact of research. Using the new Translating for Impact Toolkit of nine web-based tools, researchers can create free, secure accounts to plan, track, and demonstrate the impact of their work. METHODS/STUDY POPULATION: Development of the online toolkit includes 6 phases: 1) Review of existing tools, 2) Development of fillable PDF tool prototypes, 3) Pilot testing, 4) Development of web-based tools, 5) Usability testing, and 6) Refinement of web-based tools. First, we reviewed existing tools for measuring research impact. We then created prototypes of nine tools, published on the TSBM website, and pilot tested with researchers. Based on feedback and testing, we developed and launched web-based versions of the tools. We are currently conducting usability testing with researchers, which we will use to evaluate the ease-of-use and quality of the tools, identify areas for improvement, and refine the tools. RESULTS/ANTICIPATED RESULTS: Researchers can sign up for user accounts, create projects, invite collaborators and program administrators, and save progress as they complete the nine tools in the Translating for Impact Toolkit. The tools are divided into three steps: Plan (Roadmap to Impact, Benefits 2x2, Partner Mapper, and Team Manager), Track (Impact Tracker), and Demonstrate (Product Navigator, Case Study Builder, Impact Profile, and Dissemination Planner). The toolkit also includes a dashboard that provides a quick snapshot of translational impact for each project. The toolkit will help both individual translational scientists demonstrate the impact of their work and CTSA hubs evaluate impact of their projects. DISCUSSION/SIGNIFICANCE: The TSBM online toolkit is a free, secure, easy-to-use platform researchers can use to plan for, track, and demonstrate the impacts of their work. The toolkit provides a structured process that will help the next generation of scientists prioritize and promote translational impact in their work.