bidirectional communication and shared leadership leading to improved translational research. METHODS/STUDY POPULATION: The Community Health Science model was developed at UTSW over the past 20 years in efforts to integrate practices across 3 component areas – clinical practice, population health, and community organizations – into a single collaborative effort to improve health and reduce disparities. As part of the CTSA Program's translational science efforts, we have extended this model to promote community engagement in research as an additional strategy needed to achieve health equity. Our Office of Community Health & Research Engagement operates 9 programs that each fit within one or more of 4 overarching conceptual pillars - Education/Resources, Collaboration/Partnership, Outreach/ Service, Priorities/Perspectives - serving to bridge the community-academic divide and build strong, trusting relationships. RESULTS/ANTICIPATED RESULTS: The implementation of our model has resulted in measurable outcomes. To date, we have hosted 23 HealthStreet community events resulting in 464 health screenings, 203 health needs assessments completed, and 123 individuals joining our Community Research Registry allowing for future contact to participate in research. Our Community Health Coalition, comprised of 32 organizations, provides a forum for co-learning between researchers and stakeholders. We have awarded 9 grants ($175,800) for community-engaged projects. Our Community Advisory Panel has participated in 8 sessions with research teams. A total of 13 projects utilized the Spanish Language Resource, for a total of 30,617 translated words. Finally, we have hosted 9 Community Engagement Grand Rounds lectures, which included a total of 559 attendees. DISCUSSION/SIGNIFICANCE: Our model strengthens our capacity to build trust with communities and facilitate sustained community-academic partnerships. By prioritizing community engagement in research, we improve health equity by understanding community perspectives and increasing diversity in trials. We hope our model can be disseminated and scaled for greater impact.

271
Evaluation of treatment for opioid use disorder across North Carolina: a study protocol

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OBJECTIVES/GOALS: Our objectives are to: 1) characterize opioid treatment providers in North Carolina according to payment methods accepted and ability to provide medications for opioid use disorder and 2) use geomapping technology to characterize geographic access to treatment for opioid use disorder in NC. METHODS/ STUDY POPULATION: We will identify opioid treatment providers using resources published by SAMHSA and NC DHHS. We will characterize all providers identified according to provision of medications for opioid use disorder, payment or insurance accepted, and services provided. ArcGIS will be used to characterize geographic distribution of treatment resources after filtering for these key characteristics and determine access according to driving radius. RESULTS/ANTICIPATED RESULTS: We anticipate that the geographic analysis of opioid treatment provider availability will reveal limited access to treatment, particularly in rural areas. We anticipate that further filtering for factors such as provision of medications for opioid use disorder–a first-line, evidence-based intervention—and payment or insurance accepted will demonstrate that the availability of evidence-based, financially accessible treatment for opioid use disorder in North Carolina is critically limited. DISCUSSION/SIGNIFICANCE: We anticipate that an analysis of treatment options available for opioid use disorder, particularly when considering insurance status and drive times, will clearly demonstrate the need for development and expansion of opioid treatment options, and in which areas those efforts are likely to have the highest impact.

272
Engaging Michigan's Rural, Upper Peninsula Community in Translational Science to Advance Community Engagement Among Nonprofits

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OBJECTIVES/GOALS: The Michigan Institute for Clinical & Health Research (MICHR) Community Engagement (CE) Program fosters translational science and community-engaged research (CenR) through education, connecting, supporting, and funding efforts and opportunities. METHODS/STUDY POPULATION: In Michigan's Upper Peninsula, CE partnered with the Michigan Health Endowment Fund to develop a 3-hour workshop that consisted of a panel discussion on best practices of community engagement and a presentation on community engaged nonprofit management. The workshop was designed from mapping 60 participants' pre-workshop survey findings and reviewing themes from a planning meeting transcript with six community partners. Key themes that emerged included participatory budgeting, collaborative governance, communications, and community planning. RESULTS/ ANTICIPATED RESULTS: A mix methods post-workshop evaluation feedback survey was completed. The 9-item survey assessed workshop content, satisfaction, and knowledge gained using a Likert scale as well as opened questions about key takeaway and value added. Quantitative results to be analyzed. Qualitatively, some participants described the workshop as helpful and thoughtful about how to strengthen community engagement within their organizations. Others expressed a desire for more time. Regarding impact, CE received an uptake in consultations and inquiries into statewide pilot grants. The workshop facilitated new collaborations with philanthropic and community organizations serving the Upper Peninsula. DISCUSSION/SIGNIFICANCE: Lessons learned highlight trust, understanding community culture, and moving slowly in a newly formed collaboration. The approach utilized in the Upper Peninsula can inform translational methods for additional partnerships underway across the state of Michigan.