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Implementation of a Translational Science Research Center in a high education level institution in Colombia - Latin America: Unisabana Center for Translational Science (UCTS)

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OBJECTIVES/GOALS: To establish and develop a high-level, dynamic, and self-sustainable Translational Science – research center in Colombia that promotes and articulates collaborative participation among different disciplines at Universidad de La Sabana to generate impactful solutions in health to transfer the knowledge to the local community. **METHODS/STUDY POPULATION:** With the support of core units of the University, internal funding was given for the establishment of the Research Center. An internal call was performed for recruiting researchers for multiple disciplines interested in joining the UCTS. After the researchers were selected, training of the research community in translational science and funding acquisition was performed towards the objective of interdisciplinary projects with impact in the local community. Project management strategies have been used for the follow-up of the advancements of the implementation of the UCTS. Operational structure and business plan for future self-sustainability are being designed. UCTS is proposed as an articulating party among different actors in clinics, research, and industry, for science and funding management. **RESULTS/ANTICIPATED RESULTS:** As an starting point, 8 research groups of different disciplines of the University have been integrated with the UCTS, increasing the research capacity in translational science. Internal administrative processes have been articulated within the institution and unified processes for international grants applications have been established in order to optimize the funding acquisition and management. Training programs for the research community, and community engagement activities have been offered as well. Networking relationships have been strengthened among the researchers enhancing international collaborations. Novel research projects are being designed towards real solutions in health for the local community, promoting the transference of knowledge from the benchside to the community. **DISCUSSION/SIGNIFICANCE:** The implementation of the UCTS led to the integration of disciplines within the University, towards new research projects with common interests for the local community. It has been an enriched experience using the project management approach, fulfilling a huge milestone for the University, aligned with the internal strategic priorities

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Alternative Clinical Trials Staffing Models for Improved Efficiency, Retention, and Profitability

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OBJECTIVES/GOALS: High turnover rates of clinical trials staff pose obstacles to the quality and efficiency of conducting clinical trials. We have explored alternative staffing models to address these translational barriers and to improve the financial viability and return on investment of a centralized clinical trials office. **METHODS/STUDY POPULATION:** Implementation of an

alternative clinical trials staffing model that leveraged burnout rates in clinical service areas by hiring APPs, RNs, EMTs, OTs and PTs in tandem with traditional CRAs/CRCs. Financial modelling of employing higher salaried clinical professionals was analyzed with regards to greater staff retention, trials efficiency, and operational cost savings. **RESULTS/ANTICIPATED RESULTS:** Since 2014, 30 of 51 (59%) staff left the clinical trials office with 49% of these leaving prior to 2 years employment. Using average local CRCII compensation values, the costs associated with these transient staff amounted to \$2.51 million (i.e., recruitment, replacement, and training). Models of staffing that replace 2 CRAs, 2 CRCIs and 2 CRCIIs with an RN, APP, CRCI and 3 CRAs increases compensation by 24.1%. This increase, however, is offset by greater workload capacity, retention, and more efficient trials operations. In addition, revenue generating PI clinical activity is sustained by employing credentialed APPs for study visits. **DISCUSSION/SIGNIFICANCE:** Long-term financial savings and greater clinical trial operational efficiency may be accomplished by seeking clinical professionals looking for alternative opportunities with greater work-life balance while leveraging their advanced clinical skills and licensing.

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The Development of New Institutional Policies on Mitigating Unacceptable Behavior and Managing Disruptive Research Participants

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OBJECTIVES/GOALS: In a 2022 NASEM Report, “. . . successful inclusion of underrepresented populations in research is investing in diverse research teams to enhance congruence and to optimize recruitment and retention success.” Thus, academic research institutions must provide safe, respectful and inclusive work environments to support diverse research teams. **METHODS/STUDY POPULATION:** Resources, policies and protocols related to disruptive research participants have not been well articulated at our institution. Given this dearth of information, we launched a new initiative across our CTSA, IRB, Office of General Counsel and Department of Population Health. The multipronged approach includes: 1) Conduct a scoping review of published and gray literature to identify best practices, trainings and resources to mitigate discrimination, harassment of research team members; 2) Co-develop new institutional policies and procedures to ensure safety and respect for both research staff and participants; 3) Develop an online training on research team field and workplace safety; and 4) Widely disseminate policies and resources to address the overall gap in academic research. **RESULTS/ANTICIPATED RESULTS:** Our ongoing scoping review has shown that here is an overall lack of information on bias, discrimination and harassment perpetrated by research participants towards research teams. Based on our activities, new Human Research Protection policies were launched. These include defining what disruptive participant behavior in research is, the introduction of a Statement on the Conduct of Participants in Research Studies, and steps study teams may implement to manage disruptive behavior initiated by a research participant. Next steps include the development of training resources for study teams on the new policies and to introduce de-escalation