

Small Group Discussions

We are using a different approach for this year's small group discussions. Rather than having groups focusing on a single topic, each group will have the opportunity to have input on all 4 topics. On Day 1 we will generate a list of strategies for each topic, rank them by feasibility and impact, and then list barriers. On Day 2, we'll create milestones and timeline for the 4 topics.

Topic A: Improving community engagement in UC Research

Engaging community stakeholders is critical to the translation of research into improved health outcomes. "Community" can include patients and their families, care providers, and policy makers, as well as patient advocates. How can UC BRAID optimally engage our partners in the goal of accelerating discovery into practice that serves the community? How can the community be engaged across the translational pipeline?

Examples of strategies:

- Develop UC-wide guidelines for creating Community Advisory Boards (CAB) focused on biomedical research
- Employ established approaches such as Community Engagement Studios (consultative session with CAB) to integrate stakeholder concerns and solutions into clinical trial design at the earliest stages of protocol development.

Topic B: Facilitating multi-site research

With our vast and diverse patient population, geographic diversity and world class researchers, University of California can position itself to attract both federally funded and industry sponsored multisite trials. How can UC BRAID tap into the unique talent and unprecedented scale of the UC system to facilitate the kind of novel multisite clinical trials that can transform health care and delivery?

Examples of strategies:

- BRAID can support early pilot-study resources for multi-UC campus research addressing significant health issues to the people of California
- BRAID can proactively match NIH multicenter funding opportunities (U and P awards) with talent across the BRAID campuses

Topic C: Better integrating basic and applied clinical research

In our quest to accelerate research that improves health, there still remain structural and cultural silos that inhibit collaboration among basic, translational, clinical and data scientists. University of California has a deep bench of scientists across this continuum. How can we optimize the collaboration between the discovery and delivery components of UC's health care enterprise? What strategies should we consider to better mix and cross-pollinate basic and applied researchers?

Examples of strategies:

- BRAID can sponsor UC-wide "unmet needs" conferences bringing together basic scientists and clinical/translational resources to identify potential synergies for challenging medical problems
- BRAID can support pilot and catalytic early-phase research that brings together basic and applied scientists and clinicians

Topic D: Moving the UC to a Learning Health System: Integrating UC Biomedical Research into UC Clinical Enterprises

In the last decade, the framework and implementation of the Learning Health System (LHS) has begun to inform the interchange between clinical research and healthcare delivery.

Learning health systems are organizations or networks that continuously self-study and adapt using data and analytics to generate knowledge, engage stakeholders and implement behavior change to transform practice.¹ Knowledge generation processes are embedded in daily practice to produce continual improvement so that evidence is available when it is needed, and applied in health care.

How best can we make use of learning health system concepts: to build a “virtuous cycle” in which the biomedical research enterprise and UC health care system collaborate seamlessly to continually improve health?

Examples of strategies:

- Identify examples within each BRAID site where clinical data has been used iteratively to inform medical practice and disseminate these as “case studies” of the Learning Health System
- Offer workshops on the Learning Health System approach that can be accessed as webinars

¹ “Learning Health Systems.” University of Michigan Medical School, University of Michigan, <https://medicine.umich.edu/dept/>