2023 Strategic Planning Activities

Annual Summary and Report

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Justification Statement

The central leadership of the Georgia Clinical and Translational Science Alliance (Georgia CTSA), along with the Evaluation & Continuous Improvement (ECI) program, identified the need for annual discussion and reporting on the status of each program to consistently track and assess the aims and milestones of the programmatic infrastructure that supports clinical and translational research in Georgia. This is necessary to determine when programs need to adjust their plans and milestones in support of their individual specific aims and the overarching aims of the alliance. To serve this goal, the ECI team conducts annual Strategic Planning Activities used to characterize program activities, inform development and monitoring of processes and milestones, and initiate mid-course amendments. Annual Strategic Planning Reports also provide summary evidence of effectiveness and impact in reaching each program's specific aims and objectives year to year.

The Strategic Planning process consists of ECI developing an approach for strategic evaluation, directors meeting within their programs and then meeting with ECI to evaluate and set goals. ECI collects information on key accomplishments in the previous year, as well as challenges and goals for the next year, in order to evaluate indicators and monitor progress toward accomplishing milestones over the course of a program year. The timeline for the process is predetermined by ECI and communicated to each program to document the program progress and provide feedback. This includes completing written strategic planning worksheets and conducting interviews with program directors and team members to discuss the objectives detailed in these documents as well as methods for measuring outcomes. Results are shared with the Executive Council for approval, and then included in the annual reports to the External Advisory and Executive Oversight Committees each year. These efforts contribute to more efficient progress toward the aims and goals of all program groups, which, in turn, aid in the aggregate impact of the Georgia CTSA.

Acronym/Abbreviations List

CTR	Clinical & Translational Research
Programs:	
BERD	Biostatistics, Epidemiology & Research Design
CE	Community Engagement
CMDTS	Collaboration & Multi-Disciplinary Team Science
ECI	Evaluation & Continuous Improvement
OGCC	Organization, Governance, Collaboration & Communication
GCRCs	Georgia CTSA Clinical Research Centers
ICa	Innovation Catalyst
Infor	Informatics
ISP	Integrating Special Populations
NetCap	Network Capacity
Peds	Pediatrics
Pilots	Pilot Translational and Clinical Studies
QE	Quality & Efficiency
ResEd	Research Education
RKS	Regulatory Knowledge & Support
TWD	Translational Workforce Development
Institutions:	
Emory	Emory University
MSM	Morehouse School of Medicine
GA Tech	Georgia Institute of Technology
UGA	University of Georgia

Overall Summative Evaluation of 2023 Strategic Planning Activities

An overarching goal for this year's strategic planning activities was to evaluate progress against goals and to open a dialogue on challenges and strategies since the transition to the new grant cycle. The following summative evaluation describes the process and findings of the 2023 Strategic Planning Activities, providing a bird's eye view of the structure, accomplishments, and strategic plans of the Georgia CTSA.

Steps and Timeline

The Georgia CTSA last conducted strategic planning activities in fall 2020, at the height of the COVID-19 pandemic. Since that time, COVID-19 has become endemic, as a permanent, if less exigent, priority for clinical and translational research. In 2021, the Georgia CTSA worked painstakingly to submit its 3rd grant renewal application to the NIH, which was awarded in fall 2022. With a new 5-year cycle of funding, strategic plans now center on maximizing the time and resources available to pursue the mission and goals of the alliance. The 2023 Strategic Planning process was initiated in December 2022 with ECI distributing strategic planning worksheets to each program followed by brainstorming at the Leadership Retreat. This was followed by individual strategic planning meetings attended by ECI, OGCC, and each program's leadership. Programs detailed current objectives and activities serving

their specific aims and answered questions regarding this year's theme of *A New Beginning*. Because significant time has elapsed since submitting the 2021 grant renewal, key questions asked this year included how aims and leadership have changed or remained the same since that submission, and whether any ideas planned for the 2022 FOA would be retained. Program leaders also discussed how their programs collaborated across groups to make progress toward common goals, broad themes around cohesion, and early plans for restructuring in anticipation of the next funding cycle. OGCC discussed updates to communication plans and issues related to organizational governance. ECI drafted brief reports summarizing the findings of each program meeting, including: (1) elevator summary of aims and services; (2) progress against milestones since the last report; and (3) challenges and goals for the next year. Reports were submitted to each program for edits and approval and then included in this report.

Transition to Grant Cycle 4

As part of the strategic planning process, programs were asked to identify notable ways that they have made accomplishments toward goals since the 2020 report, which occurred prior to the grant renewal process. Answers frequently involved continuation and development of successful ongoing activities and expanding scope of work. Some programs are making a difference through the **collective impact of long-running services,** such as decades of clinical trial support through the GCRCs and training through the KL2 and TL1 programs, and over 15 years of pilot grants and expert consultations. Since 2020, standout accomplishments included **high-profile events** like the annual Regional Clinical and Translational Science Conference, **innovative offerings** like ICa's AppHatchery, and **expansions of services**, including extensions aimed toward ongoing priority areas like health equity and COVID-19. Progress has been made through collaborative efforts across the multiple Georgia CTSA institutions, across programs, and across statewide and nationwide networks. The transition to the new grant renewal brings a significant increase in funding compared to previous grant cycles, especially in the form of institutional commitments (see **Figure 1**). This increase will largely be invested in early-stage researchers supported by the Research Ed and Pilots programs. Key accomplishments and future plans for every program are detailed in their respective individual summary reports (beginning on p. 9).

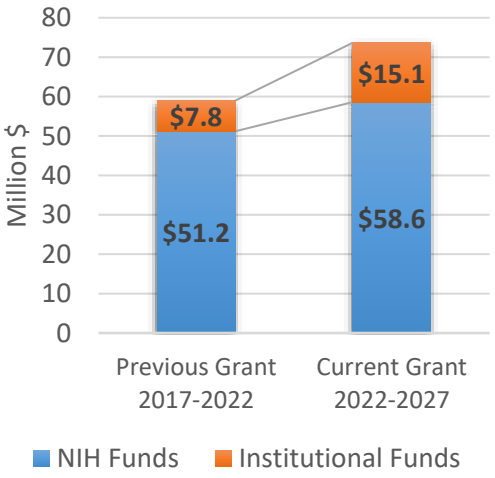

Figure 1. Increase in total funding, in millions, from previous to current grant

COVID Continues

The Georgia CTSA continues to serve as **a vital component of national efforts to accelerate and facilitate targeted research on COVID-19** tests, treatments, vaccines, corollaries, and outcomes. The need to address infectious outbreaks, from H1N1, Zika, and Ebola to coronaviruses, with maximal speed and efficiency remains a strength and priority for Georgia CTSA institutions. For instance, QE's Rapid Response Team is designed to expedite pre-award approval processes and enrollment of high priority research in the event of an emergency health crisis. CMDTS responds to changing needs of the research workforce by developing and offering collaboration events and resources on timely topics. NetCap works to counteract challenges to recruiting eligible and diverse participants. Informatics focuses on pipeline development of a real-time analytics platform for national repositories of clinical data, including the integration of COVID-19 related information feeds across institutions. To support innovative testing capability, leaders from ICa, GCRCs, ECI, and NetCap administer the NIH's Rapid Acceleration of Diagnostics (RADx) initiative for the development, commercialization, and implementation of technologies for COVID-19 testing. In sum, the

Table 1. Staff representation at each partner institution

	Emory	MSM	GA Tech	UGA
BERD	✓	✓	✓	✓
CE	✓	✓	✓	✓
CMDTS	✓	✓	✓	✓
ECI	✓	✓	-	✓
GCRCs	✓	✓	-	✓
ICa	✓	✓	✓	✓
Infor	✓	✓	✓	✓
ISP	✓	✓	-	✓
NetCap	✓	✓	-	✓
OGCC	✓	✓	✓	✓
Peds	✓	✓	-	-
Pilots	✓	✓	✓	✓
QE	✓	-	-	-
Res Ed	✓	✓	✓	✓
RKS	✓	-	-	✓
TWD	✓	-	-	✓

Georgia CTSA continues to rise to this challenge by effectively leveraging its collective strengths, knowledge, and collaborative networks to support the ongoing struggle against COVID-19.

Working Cohesively Across a Unified Alliance

Teamwork & Communication Across <u>Institutions</u>

The Georgia CTSA emphasizes operating as **a unified team, leveraging the complementary strengths and resources of four distinct institutions**. To create an alliance that makes more of these institutions than the sum of their parts, program leaders across the alliance deliberately cultivate ties and maintain staff representatives at each relevant partner institution, (see **Table 1)**. Staff representation is defined as having leadership or staff with a defined position/percent effort, such that the program has formal operations and financial stake at that institution.

Even when programs do not have staff at all institutions, there has been a sincere effort to strengthen connections across institutions such that programs have team members with unique strengths situated at all institutions that are relevant to their operations. All programs have teams that collaborate across institutions, including programs focused directly on clinical research (i.e. GCRCs, NetCap, ISP) that operate at Emory, MSM, and UGA. Although GA Tech does not have a clinical research unit, GA Tech investigators do utilize relevant programs to conduct and collaborate on research focused on biomedical engineering and innovative health technologies.

Cross-institutional collaboration also exists beyond operational presence at each institution. Importantly, all Georgia CTSA programs offer their resources (including events, services, consultations, trainings, & grants) to investigators at all four partner institutions and their collaborators. Program leadership and board members come from all institutions whenever possible, and for some resources, such as pilot grants, competitive advantages may be given to projects that involve more than one institution. Cross-institutional collaboration also occurs regularly with other institutions affiliated with the Georgia CTSA, such as with faculty jointly appointed and carrying out operations at Children's Healthcare of Atlanta, Grady Hospital, and the Atlanta VA Hospital.

Teamwork & Communication Across <u>Programs</u>

In addition to cross-institutional communication and collaboration, the Georgia CTSA continues to emphasize **cross-program collaboration as a means of drawing together diverse skills and interests** toward the common mission of the alliance. During the strategic planning process, ECI catalogues instances of cross-program collaborations that serve to enhance the impact of program support. **Figure 2** depicts collaborative ties among programs as of 2023, which

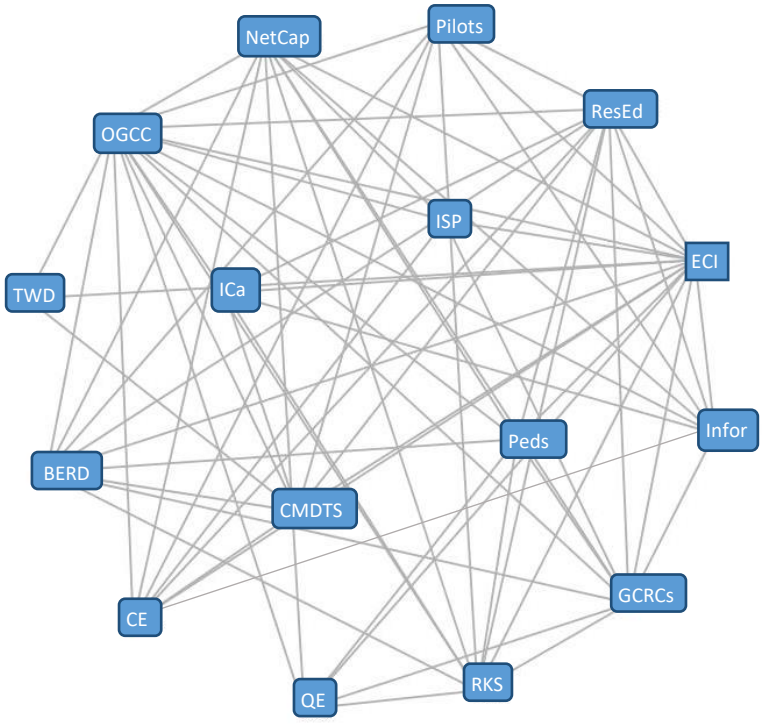

Figure 2. 2023 Program Collaboration Network

In 2022, ICa's AppHatchery joined forces with Children's Healthcare of Atlanta to develop a nurse-patient communicator app that aids in point-of-care bedside tasks for children with limited English proficiency

includes shared activities that produce a shared product or achievement, claimed by and serving the aims of both programs. For example, BERD collaborates with the Pilots program to offer and administer pilot grants for work in biostatistics, epidemiology, and research design.

The Program Collaboration Network reveals that, on average, programs work with about 8 other programs, with considerable variability. Programs such as OGCC and ECI touch all programs through their overarching role in the administrative home. Programs like NetCap, GCRCs, and Peds, also reach across many programs through common interests in ethical and inclusive human subjects research. The network includes 70 out of 120 possible collaborative ties, (see **Appendix A** for detailed collaboration grid), signifying a **solidly connected collaboration network, with yet ample opportunity to forge new connections**.

In addition to cross-program collaborations, programs work toward ambitious common goals in parallel, even when not working in tandem. It may not be necessary or advantageous for programs to work on specific projects together, but the Georgia CTSA may still play an anchoring role in maximizing such efforts via cross-promotion, shared resources, and central coordination, preventing duplication of efforts and encouraging cooperation wherever relevant.

Teamwork and Communication Across <u>Georgia & Beyond</u>

Making a **conscious effort to extend operations across the state of Georgia (and beyond)** remains a priority for the Georgia CTSA. Programs have worked toward achieving this goal by incorporating new partners and services that address issues of statewide or even nationwide concern. One notable way in which the Georgia CTSA reached beyond Atlanta was a Grant Writing Workshop, held by CE and the State Office of Rural Health, for rural community members. ISP and CE also leveraged statewide networks through UGA's Archway and Extension programs, and CE has steering board members from across the state. ISP's Fishers of Men program, a collaboration with UGA, MSM, GA Dept. of Public Health, community organizations, and rural churches, is a T4, community-based, multilevel intervention to address disparate outcomes among rural men with or at risk for chronic diseases.

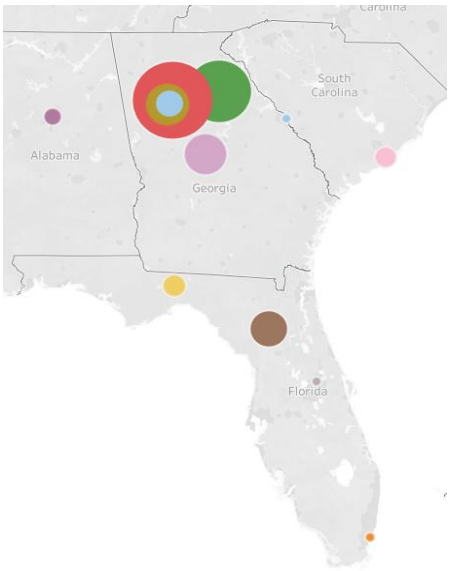

Figure 3. 2022 Regional Conference Attendees' Home Institutions

Where possible, Georgia CTSA activities reach not only across but beyond the state of Georgia. The annual Southeastern Regional Clinical and Translational Research Conference benefits from a wide geographic scope with attendees from neighboring CTSA hubs in Florida, Alabama, and South Carolina. This successful, three-day event makes a clear contribution to clinical and translational science in the southeast region by creating a forum for the exchange of ideas and opportunities to create and strengthen wide professional networks. The 2022 conference hosted **289 attendees from 17 institutions and organizations** across the southeast (See **Figure 3**) and was given a rating of 4.5/5 stars by post-event survey respondents. Keynote speakers have included Drs. Joni Rutter and Mike Kurilla from NCATS. The 2023 conference, held in March, is currently being evaluated, but was attended by well over 300 people, and preliminary reviews have proclaimed it the best conference thus far.

Also beyond Georgia, several **cross-hub collaborations** have been undertaken this year, including TWD partnering with University of Southern California (SC-CTSI) to continue to develop a shared Course Catalog platform with an online education library providing high-quality

Georgia CTSA program teams have developed and disseminated important advances in translational science through an escalating volume of scholarly publications on topics such as: AI ethics, recruitment science, bibliometrics, health equity, maternal health, and new translational technologies and tools

training opportunities for clinical research professionals, and ECI chairing the national CTSA Evaluators Bibliometrics Workgroup and collaborating with many of its members on CTSA-wide evaluation projects and manuscripts.

This year has also seen a dramatic increase in **scholarly dissemination** of translational science research authored by CTSA program teams. Since the last report, over 50 publications have been authored by members of CE, ECI, ICa, Infor, ISP, NetCap, Peds, RKS, and TWD, across all four institutions. Many publications reflect collaborations across institutions and programs that publicize the CTSA's advances in translational knowledge, activities, and methodologies. **Appendix B** lists selected CTSA team publications published in the past reporting period. This is evidence of an accumulation of exceptional productivity over the past years of the grant as well as a capacity to see projects through from conception to evaluation to public distribution. These activities show that the reach of the Georgia CTSA does not stop at the state border and that opportunities for productive collaborations are embraced whenever possible.

Next Steps: Strategic Plans for Grant Cycle 4

Leadership Retreat

The Georgia CTSA met as a group in December 2022 for our annual Leadership Retreat. Over the course of this day, PIs, Directors, and staff exchanged information and ideas regarding the current state of the alliance. Presentations and group brainstorming sessions resulted in some common impressions and themes expressed among many of the individuals who were present. With the start of a new beginning, and many new leaders joining the group, the time was right to explore new ways to optimally organize and govern the hub. The organizers specifically asked the group how functions and cores could better collaborate, and how we could position ourselves to address the next PAR. Key points that emerged from these group discussions and presentations included the need to…

- *Reorganize* – align specific aims of functions and cores with broad themes relevant to the next PAR to simultaneously break down silos and better position us for the next application
- *Improve customer discovery* – identify customer needs using a proven approach and a single point of entry. Decide if we need to scale up what we have or consider a new model
- *Coordinate rather than compete* – services should complement rather than compete with existing services offered at partner institutions. We need better integration OUTSIDE the CTSA structure
- *Improve internal communication* – identify and implement a platform more robust than e-mail. Decide whether to build upon what we have or add a program like Slack or Teams
- *Promote ourselves* – ensure that target audiences know who we, what we do, and how we can help them
- *Share success stories* – NIH, institutional officials, and our customers need stories to help illustrate how we are making a difference
- *Promote community engagement* – needs broader integration and impact because this touches almost everyone
- *Form a Health Equity Steering Board* – that would meet regularly to synergize expertise, align health equity strategies across the alliance, and determine success in meeting goals

In response to these identified needs, the Executive Council proposes several strategic goals for 2023. First, there is broad agreement that it would be beneficial to modify the format of Leadership Councils meetings from core/function based to module or theme-based meetings with working groups relevant to the new PAR (e.g., health equity, workforce

development). Next, OGCC will organize goals around the so called *3Ds*- Develop, Demonstrate, Disseminate. *Develop* will include improved internal communications using TEAMS, Slack, or a similar program, and adoption of new PAR language in this communication. It will also involve harmonizing rather than competing with institutional services. Finally, this will include development of customer discovery efforts via needs assessment for popular services and additional service needs. *Demonstrate* will include validating and demonstrating return on investment through measurable outcomes and dashboard metrics reported quarterly or monthly. *Disseminate* will include updates to the Georgia CTSA website, sharing of success stories and metrics with institutional leaders and the CTSA consortium, and more pro-actively planned Road Show presentations, both for established investigators and as part of welcoming new investigators. We will focus our Communications strategy on employing bidirectional communication between internal and external audiences to collaborate, connect, and engage. By reviewing and refining our communications tools, we aim to effectively promote innovations that improve translation, collaboration opportunities that accelerate translational research, and research programs that address health disparities to deliver the benefits of translational science to all.

CMDTS's Georgia CTSA Match online platform allows users to connect and communicate with other researchers who have similar interests. These matches encourage networking opportunities and meaningful collaborations that spur research forward

Conclusion

The strategic planning meetings that followed the leadership retreat have served to kickstart for the new grant renewal, initiating discussion and reflection regarding program status, challenges, and plans for the current grant and beyond. The leadership of the Georgia CTSA will utilize this document to inform ongoing strategic plans and alliance-wide priorities. This report will serve to brief the External Advisory Committee, which will meet in March, on the ongoing activities and accomplishments of the alliance. With a strategic planning process that allows programs to optimally serve their specific aims and the overarching goals of the alliance, the Georgia CTSA is now well-positioned to pursue peak productivity toward common goals over the next five years.

Appendix A. Program Collaboration Grid

	BERD	CE	CMDTS	ECI	GCRCs	ICa	Infor	ISP	NetCap	OGCC	Peds	Pilots	QE	ResEd
CMDTS	TEAMS	CE collab events	-											
ECI	Strategic planning	Strategic planning	Strategic planning	-										
GCRCs	SAC Reviews			Strategic planning	-									
ICa			BizGrants workshop	Strategic planning		-								
Infor		Outreach via mHealth		Strategic planning	Study analysis/prep	Apphatchery	-							
ISP		USDA grant project		Strategic planning	USDA grant project			-						
NetCap	Studio consults	Community recruitment outreach		Strategic planning	Coord center, recruitment		EPIC/EHR	Rural recruitment	-					
OGCC	Governance	Governance	Governance	Governance	Governance	Governance	Governance	Governance	Governance	-				
Peds	SAC Reviews			Strategic planning	Coord center				Coord center	Governance	-			
Pilots	BERD pilot	CE grants	CMDTS pilots	Strategic planning			Informatics pilot			Governance		-		
QE				Strategic planning	Coord center				Coord center	Governance	Coord center		-	
ResEd	MSCR course	MSCR course	Team Science Skills Series	Strategic planning	Clinical rotations	MSCR talk	MSCR course			Governance	Clinical rotations	Content reviewers		-
RKS	Studio consults			Strategic planning	Coord center, IRB agreements	RegRoadMap			Coord center	Governance	Coord center	Ethics review	Coord center	MSCR course
TWD			Team Science Skills Series	Strategic planning						Governance				
	BERD	**CE**	**CMDTS**	**ECI**	**GCRCs**	**ICa**	**Infor**	**ISP**	**NetCap**	**OGCC**	**Peds**	**Pilots**	**QE**	**ResEd**

Appendix B. Publications Authored by Georgia CTSA Program Staff 2020-2023

	Date	Title	Programs/ Institutions
1.	2022	Rollins, L., Giddings, T., Henes, S., Culbreth, W., Coleman, A. S., Smith, S., White, C., & Nelson, T. (2022). Design and Implementation of a Nutrition and Breastfeeding Education Program for Black Expecting Mothers and Fathers. *Journal of nutrition education and behavior*, 54(8), 794–803. https://doi.org/10.1016/j.jneb.2022.03.011	• CE • MSM
2.	2022	Allen CG, Bethea BJ, McKinney LP, Escoffery C, Akintobi TH, McCray GG, McBride CM. Exploring the Role of Community Health Workers in Improving the Collection of Family Health History: A Pilot Study. *Health Promot Pract*. 2022 May;23(3):504-517. doi: 10.1177/15248399211019980. Epub 2021 May 28. PMID: 34049463.	• CE • Emory, MSM
3.	2022	Clifford G, Nguyen T, Shaw C, Newton B, Francis S, Salari M, Evans C, Jones C, Akintobi TH, Taylor H Jr. An Open-Source Privacy-Preserving Large-Scale Mobile Framework for Cardiovascular Health Monitoring and Intervention Planning With an Urban African American Population of Young Adults: User-Centered Design Approach. *JMIR Form Res*. 2022 Jan 11;6(1):e25444. doi: 10.2196/25444. PMID: 35014970; PMCID: PMC8790689.	• CE, Infor • Emory, MSM
4.	2022	Greteman, B.B., Rollins, L., Penn, A., Berg, A., Nehl, E., Llewellyn, N., Weber, A., George, M., Sabbs, D., Mubasher, M., & Akintobi, T. H. Identifying the Community-Engaged Translational Research Collaboration Experience and Health Interests of Community-Based Organizations Outside of Metropolitan Atlanta. *Journal of the Georgia Public Health Association, 8*(3), Article 18. doi:10.21203/rs.3.rs-52357/v1	• CE, ECI • Emory, MSM, UGA
5.	2023	Llewellyn, N.M, Weber, A., Pelfrey, C., DiazGranados, D. & Nehl, E. J. Translating Scientific Discovery into Health Impact: Innovative Bibliometrics Bridge CTSA-Supported Publications to Policy. *Academic Medicine, manuscript accepted for publication*	• ECI • Emory, Case Western, Virginia Commonwealth
6.	2022	Llewellyn, N.M. & Nehl, E. J. Predicting Citation Impact from Altmetric Attention in Clinical and Translational Research: Do Big Splashes Lead to Ripple Effects? *Clinical and Translational Science, 15*(6), 1387-1392. doi: 10.1111/cts.13251	• ECI • Emory
7.	2022	Llewellyn, N.M, Weber, A, Fitzpatrick, A. M. & Nehl, E. J. Big Splashes & Ripple Effects: A Review of the Short- & Long-term Impact of Publications supported by an NIH CTSA Pediatrics Program. *Translational Pediatrics, 11*(3), 411-422. doi: 10.21037/tp-21-506	• ECI, Peds • Emory, Children's
8.	2021	Llewellyn, N.M., Adachi, J.J., Nehl, E. J., & Heilman, S.S. Participant perspectives on a seminar-based research career development program and its role in career independence. *Journal of Investigative Medicine: the official publication of the American Federation for Clinical Research*, 69(3), 775–780. https://doi.org/10.1136/jim-2020-001769	• ECI, Peds • Emory, Children's
9.	2021	Asiri, I. M., Chen, R. C., Young, H. N., Codling, J., Mandawat, A., Beach, S. R. H., Master, V., Rajbhandari-Thapa, J., & Cobran, E. K. (2021). Race and prostate specific antigen surveillance testing and monitoring 5-years after definitive therapy for localized prostate cancer. *Prostate cancer and prostatic diseases*, 24(4), 1093–1102. https://doi.org/10.1038/s41391-021-00365-w PMID: 33941865, PMCID: PMC8563495	• ISP • UGA
10.	2022	Chastain DB, Patel VS, Jefferson AM, Osae SP, Chastain JS, Henao-Martínez AF, Franco-Paredes C, Young HN. Distribution of age, sex, race, and ethnicity in COVID-19 clinical drug trials in the United States: A review. *Contemp Clin Trials*. 2022 Dec;123:106997. doi: 10.1016/j.cct.2022.106997. Epub 2022 Nov 8. PMID: 36368481; PMCID: PMC9642036.	• ISP • UGA
11.	2022	Ali AM, Gaglioti AH, Stone RH, Crawford ND, Dobbin KK, Guglani L, Young HN. Access and Utilization of Asthma Medications Among Patients Who Receive Care in Federally Qualified Health Centers. *J Prim Care Community Health*. 2022 Jan-Dec;13:21501319221101202. doi: 10.1177/21501319221101202. PMID: 35603467; PMCID: PMC9130805.	• ISP • MSM, UGA
12.	2022	Chastain DB, Osae SP, Thomas GM, Burt AM, Rao A, Henao-Martínez AF, Franco-Paredes C, Waller JL, Young HN. Clinical Severity on Hospital Admission for COVID-19: An Analysis of Social Determinants of Health From an Early Hot Spot in the Southeastern U.S. *J Prim Care Community Health*. 2022 Jan-Dec;13:21501319221092244. doi: 10.1177/21501319221092244. PMID: 35426348; PMCID: PMC9016530.	• ISP • UGA

13.	2022	Boguslawski SM, Joseph NT, Stanhope KK, Ti AJ, Geary FH, Boulet SL. Impact of the COVID-19 Pandemic on Prenatal Care Utilization at a Public Hospital. *Am J Perinatol*. 2022 Sep 16. doi: 10.1055/a-1877-7951. Epub ahead of print. PMID: 35709724.	• ISP • Emory
14.	2022	Stanhope KK, Piper K, Goedken P, Johnson T, Joseph NT, Ti A, Geary F, Boulet SL. Quality and satisfaction with care following changes to the structure of obstetric care during the COVID-19 pandemic in a safety-net hospital in Georgia: Results from a mixed-methods study. *J Natl Med Assoc*. 2022 Feb;114(1):94-103. doi: 10.1016/j.jnma.2021.12.017. Epub 2022 Jan 14. PMID: 35039177; PMCID: PMC8759626.	• ISP • Emory
15.	2023	Porter KM, Kraft SA, Speight CD, Duenas DM, Niyibizi NK, Mitchell A, O'Connor MR, Gregor C, Liljenquist K, Shah SK, Wilfond BS, Dickert NW. Research recruitment through the patient portal: perspectives of community focus groups in Seattle and Atlanta. *JAMIA Open*. 2023 Feb 3;6(1):ooad004. doi: 10.1093/jamiaopen/ooad004. PMID: 36751464	• NetCap • Emory
16.	2022	Niyibizi, N. K., Speight, C. D., Najarro, G., Mitchell, A. R., Sadan, O., Ko, Y. A., & Dickert, N. W. (2022). Experimenting with modifications to consent forms in comparative effectiveness research: understanding the impact of language about financial implications and key information. *BMC medical ethics*, *23*(1), 34. https://doi.org/10.1186/s12910-021-00736-x	• NetCap • Emory
17.	2021	Rothwell E, Brassil D, Barton-Baxter M, Brownley KA, Dickert NW, Ford DE, Kraft SA, McCormick JB, Wilfond BS. Informed consent: Old and new challenges in the context of the COVID-19 pandemic. J Clin Transl Sci. 2021 Apr 7;5(1):e105. doi: 10.1017/cts.2021.401.PMID: 34192059	• NetCap • Emory
18.	2021	Speight, C. D., Gregor, C., Ko, Y. A., Kraft, S. A., Mitchell, A. R., Niyibizi, N. K., Phillips, B. G., Porter, K. M., Shah, S. K., Sugarman, J., Wilfond, B. S., & Dickert, N. W. (2021). Reframing Recruitment: Evaluating Framing in Authorization for Research Contact Programs. *AJOB empirical bioethics*, *12*(3), 206–213. https://doi.org/10.1080/23294515.2021.1887962	• NetCap • Emory, UGA
19.	2021	Niyibizi, N. K., Speight, C. D., Gregor, C., Ko, Y. A., Kraft, S. A., Mitchell, A. R., Phillips, B. G., Porter, K. M., Shah, S. K., Sugarman, J., Wilfond, B. S., & Dickert, N. W. (2021). Public attitudes toward an authorization for contact program for clinical research. *Journal of the American Medical Informatics Association: JAMIA*, *28*(2), 354–359. https://doi.org/10.1093/jamia/ocaa214 PMID: 33150424	• NetCap • Emory, UGA
20.	2020	Niyibizi N, McIntosh S, Hudson BL, Sipocz A, Paku E, Dykes C. CTSA recruitment resources: An inventory of what CTSA hubs are currently offering. *J Clin Transl Sci*. 2020 May 12;4(6):529-536. doi: 10.1017/cts.2020.44. PMID: 3394822	• NetCap • Emory
21.	2020	Dickert, N. W., Bernard, A. M., Brabson, J. M., Hunter, R. J., McLemore, R., Mitchell, A. R., Palmer, S., Reed, B., Riedford, M., Simpson, R. T., Speight, C. D., Steadman, T., & D Pentz, R. (2020). Partnering With Patients to Bridge Gaps in Consent for Acute Care Research. *The American journal of bioethics : AJOB*, *20*(5), 7–17. https://doi.org/10.1080/15265161.2020.1745931	• NetCap, RKS • Emory
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