#### Research Collaboration Guidelines Innercare

Innercare, formerly Clínicas de Salud del Pueblo Inc., welcomes establishing research collaborations with academic researchers. Innercare is interested in collaborating on research projects that are consistent with the Innercare mission and research areas of interest, that have a positive impact on patients and the organization, and have the potential to result in a long-term research partnership with Innercare.

Researchers interested in establishing a research collaboration with Innercare should read and follow these guidelines, and submit a Research Interest Form via SDSU HealthLINK Center.

## Innercare Mission

To improve the health and well-being of the communities we serve through providing access to excellent care, available to all.

# **Innercare Priority Research Areas**

- 1. Quality of care improvements
- 2. Innovations in clinical care
- 3. Clinical system interventions
- 4. "Chronic Care Model" for management of chronic diseases (specifically diabetes, asthma, hypertension)
- 5. Dissemination and implementation of evidence-based practices
- 6. EHR analyses to improve clinical practices and patient care
- 7. Behavioral health stigma
- 8. Health promotion outreach

## Types of research Innercare supports

- Programmatic research that improves access to and/or quality of care.
- Research that supports expansion of clinical services.
- Research that brings new resources to Innercare.

#### Types of research Innercare does not support

- Research that only uses Innercare as a recruitment site.
- Research with no tangible short-term or long-term benefits to patients at Innercare.
- Grant applications with subcontract budgets that are not adequate to support the costs to administer and carry out the terms of the subcontract.

## **Eligibility**

The submitted Research Interest Form must be led by an academic researcher or research team with expertise and/or potential to successfully conduct the proposed research project. The PI should have expertise and publications related to the research project being proposed, and will be asked to *submit his/her/their CV* with the Research Interest Form (Stage 1).

## **Review Criteria**

Research interest forms will be reviewed according to the following criteria:

- Relevance to and impact on the clinical priorities of Innercare.
- Relevance to and impact on the training priorities at Innercare.
- Feasibility of carrying out the research project given the staff needs.
- The extent to which the research project has the potential to help develop a program of research or new clinical services and/or outreach programs at Innercare.

#### Submission Workflow Process

See Innercare Research Interest Forms (Stage 1 and Stage 2).



#### **Reviewers of Research Interest Forms**

- 1. HLINK CEC: SDSU HealthLINK Center Community Engagement Core Co-Lead, Co-Investigator and/or Coordinator.
- 2. Innercare: Innercare Chief Medical Officer and Chief Development Officer.

## Research Interest Form – Stage 1

- 1. <u>Primary Contact Person</u>. This is the person who will serve as the liaison for the project during the development phase. This person may or may not be the lead academic researcher (i.e., Principal Investigator/Project Leader).
- 2. <u>Secondary Contact Person</u> (*if applicable*). This is a designee for the primary contact person, or may be the lead academic researcher if a project coordinator/manager or another investigator is named as the primary contact person.
- 3. <u>Project Title</u>. Please provide a brief title for the project. This can be a preliminary title and may be modified during project development.
- 4. <u>Project Abstract</u>. (*limit 500 words*) Please provide a clear and concise description of the project, including the following sections: *Aims, Methods, Potential Impact, and Future Directions*. Your abstract should include a clear rationale for the project, what you hope to achieve and how, potential impact of the project on factors relevant to Innercare, and future directions for this line of research with Innercare. Please be as clear as possible when describing your methods as this information will be used to assess initial feasibility.
- **5.** <u>**Project timeline**</u>. Please provide the proposed start date and end date of the project (*MM*/YYYY-*MM*/YYYY).
- 6. <u>Proposed Investigators</u>. Please provide the names, degrees, and affiliations of all known investigators, including the lead academic researcher(s) (PI/MPIs) and co-investigators. <u>The CV for the lead academic researcher must be submitted with the Stage 1 Research Interest Form.</u>
- 7. <u>Possible Innercare Collaborators</u>. Please use this space to indicate the areas of expertise you seek in Innercare collaborators to support the proposed project. Please identify clinical departments and/or individual collaborators that you would like to work with at Innercare (*see Innercare Clinical Organizational Chart*). If this is an ongoing collaboration or you have been in communication with collaborators from Innercare, please indicate the extent to which they have committed to working with you.
- 8. <u>Funding Information</u>. If the project is not already funded and the team intends to pursue funding, please provide any information available on what funding mechanism the team intends to use to support this project. If the project is already funded, please provide the funding details.

## **Research Interest Form – Stage 2**

- 1. Does this project involve human subjects for research? Please answer "yes" or "no" to indicate whether your project will involve human subjects.
- 2. Subjects. Describe who will be included as subjects in your project, how many subjects you intend to include, and address the applicable participation considerations listed below. If you are not recruiting human subjects (e.g. EHR analysis only), please describe the patient population of interest in terms of what patient records you propose to use in your project.
  - Extent to which you propose to involve Innercare patients, families of patients, providers, clinic managers, and/or other staff as subjects.
  - General subject inclusion and exclusion criteria.
  - If applicable. What will participation involve? What is the nature and length of their involvement? •
  - How will participants be remunerated for their involvement in the project? •
- 3. Recruitment. Indicate what methods will be used to recruit subjects from Innercare. If you are not recruiting human subjects (e.g. EHR analysis only), please indicate how subjects will be identified in the EHR.
  - Include anticipated sample size for each subject group. •
  - Consider whether random sampling of patients is required.
  - The following are potential recruitment methods for consideration:
    - Reports of eligible patients using EHR data (see section on EHR Data use below).
    - Posting or distributing project flyers at clinic sites. •
    - Involvement and training of **Project staff**, on-boarded and trained as Innercare volunteers, to screen and recruit participants. If this approach is selected, please be prepared to discuss the following with Innercare:
      - Will project staff need specific training at Innercare?
      - Will project staff need access to patient data, clinic space, computer access, phone access, to integrate research activities with existing clinical activity?
    - Involvement and training of Innercare staff to assist with screening and recruiting eligible participants at Innercare or Innercare community events/health fairs/canvassing events. If this approach is selected, please be prepared to discuss the following with Innercare:
      - o How Innercare staff will be involved in your project, their anticipated activities, and if they will need to complete IRB training (CITI) certification.
      - Innercare staff who are typically involved in recruitment include Clinicians, Medical Support 0 Staff, Referral Center Staff, and Community Health Workers (or Promotoras/es). Please know that Innercare staff who assist with recruitment will need to be included in the project budget.

# 4. Electronic Health Records (EHR) Use and Information Technology (IT) Needs. Describe project needs

for EHR data.

- Consider all aspects of the research project, including to understand the patient population prior to recruitment, for recruitment purposes, for intervention purposes, and/or for evaluation purposes.
- Consider the type of EHR data that is needed:
  - o Identifiable vs. De-Identified data
  - Individual vs. Aggregate
- Consider what data will need to be accessed? Who will need access to the data?
- What IT systems will need to be accessed?
  - EHR (NextGen)
  - SharePoint for secure File Sharing, access to Recruitment Reports (SQL)
  - Will Virtual Private Network (VPN) access be needed (off-site access to NextGen and SharePoint)?
- Please note that if Innercare EHR data are used, a Data Use Agreement (DUA) may need to be established for the project (see Innercare DUA Template).

- A DUA is required any time the covered entity (i.e., Innercare) shares with an investigator (i.e., SDSURF) a limited dataset (excludes 16 categories of direct identifiers but includes 2 categories of indirect identifiers) to be used for research purposes without individual consent (i.e., the patients have not been consented and the research will proceed using a waiver of consent). A *Innercare DUA Template* is available, but each DUA must be developed in conjunction with and approved by Rick Gulizia, SDSU Assistant Vice President of Research Support Services. For more information about DUAs and limited dataset, refer to: privacyruleandresearch.nih.gov/pr\_08.asp#8d.
- o A Business Associates Agreement (BAA) already exists between Innercare and SDSURF.
- Innercare staff who are typically budgeted for in projects involving use of EHR data include Health Information Technology Staff.

#### 5. Expected Outcomes

- The research team should demonstrate the potential to have an *impact* on patient care and services at Innercare.
- Research projects and activities should have the potential to result in a change in relevant metrics or development of new clinical services.
- <u>Examples of Metrics</u>. Below are examples, but not an exhaustive list, of the types of metrics relevant to Innercare:
  - Objective measures of clinical outcomes
  - Patient-reported outcomes
  - o Number of referrals consistent with guideline-concordant care
  - Utilization rate for a targeted service
  - Cure rates among a patient population
  - Disease control rates among a patient population
- 6. <u>Clinic Sites and Space</u>. If you do not need to involve sites or require use of clinic space, please write "*Not Applicable*".
  - Which Innercare site(s) do you hope to involve in the project? (see Innercare Clinic Hours of Operation and Services).
  - Please provide details on what clinic sites are needed and what space is needed for recruitment, evaluation activities, and/or intervention delivery.
  - What is the anticipated timeframe and schedule for use of Innercare space (frequency and duration)?

## 7. Innercare Staff Involvement

- For any Innercare staff who may be involved in any aspect of the project, please consider how Innercare staff will be involved and their anticipated activities. See all sections for suggestions on who to consider including for your project given project needs.
- Based on their level of involvement, what IRB training (CITI) certification will staff need to complete?
- Will Innercare staff be considered key personnel and need to provide biosketches for the grant application submission phase?
- Advisory Group Involvement
  - Indicate whether Innercare and staff will be asked to participate in reporting and/or involvement with advisory groups, panels, or activities.
  - Innercare staff who are typically involved in advisory groups include a Clinical Champion, Research Coordinator, Chief Development Officer, Chief of Government & Community Relations, and Health Information Technology Staff.
- 8. <u>Budget</u>. Budget development will vary depending on what is required by the funder and staff requirements at Innercare. *Please note, budget information is not required on the Stage 2 Research Interest Form.* However, please consider the following when drafting your budget.

<u>Required Staff for All Projects.</u> Below are staff budget line items that must be included in any project conducted in collaboration with Innercare:

- **Medical Director and/or Clinical Champion** (one will be listed as the Subcontract Principal Investigator per Innercare preferences) Recommend at 5% FTE base
- Research Coordinator % FTE will depend on project activities
- Health Information Technology Staff % FTE will depend on project activities

## <u>Other Suggested Staff</u> (project-dependent)

- Innercare Outreach Staff
  - **Outreach Manager** % FTE will depend on project activities Supervises and coordinates community outreach staff and outreach activities.
  - **Outreach Administrative Lead** % FTE will depend on project activities Leads the hands-on and administration of community outreach activities.
  - Community Health Worker/Promotor(a) % FTE will depend on project activities -Trained community health worker who engages in various project activities from recruitment, to collecting data, to intervention delivery.
  - Referral Center Staff % FTE will depend on project activities Assists with recruitment of participants who are referred for clinical services.
- Other Innercare staff consider other staff who will be needed to complete anticipated project activities.

# Other important budget considerations:

- Innercare requires a 10% minimum indirect rate. Other indirect rates will be considered on a case-by-case basis for each project.
- The Innercare fiscal year follows the calendar year (January 1-December 31).
- After Innercare staff are named and the contract is set up, automatic billing will begin.
- A budget template is available upon request (see Innercare Budget Template).

<u>Required Subcontract Documents</u>. Documents should be prepared in collaboration with Innercare for applications. The required subcontract documents may vary for each project, but typically include the following:

- Scope of Work
- Support with subcontract budget estimates
- Subcontract budget justification
- A signed letter of support
- Biosketch for Innercare site PI and any other key personnel

#### **Contact Information**

Inquiries about Innercare Sara Sanders Chief Development Officer Innercare saras@innercare.org

#### Inquiries about the submission process Karla L. Armenta Intervention/Community Engagement Coordinator SDSU HealthLINK Center klarmenta@sdsu.edu

#### **Additional Relevant Documents**

Innercare Research Interest Forms (Stage 1, Stage 2) Innercare Organizational Chart Innercare Clinical Organizational Chart Innercare Clinic Hours of Operation and Services Innercare Budget Template (to be added) Innercare Data Use Agreement Template (to be added) Innercare Project Vignettes (to be added)