



Collaboration with Community Clinicians: A Quick Guide for UCSF Researchers

[Read the full guide here.](#)

1. What is community-engaged research?

Community-engaged research is research in which community input is incorporated in the development of the research question, implementation of the research project, analysis of the results and/ or dissemination of the findings to community stakeholders. Community engagement is an important element of the successful translation of research from bench to bedside and community.

The broad arena of community-engaged research with community-based clinicians can be classified into three basic types of questions. These questions are listed below with examples focused on healthcare access and quality, patient care, and reaching vulnerable groups.

- Epidemiological or descriptive studies: What's true for this clinic and patient population? What are the health characteristics / needs / disparities at a clinic and/or for a patient population?
- Creating evidence-based practice: Does this evaluated program or treatment work in a clinical setting? What changes are needed so that this program or treatment can work in the clinical setting it is intended for? How can this intervention be brought to scale in new and different communities?
- Creating practice-based evidence: Does this practice-created program work? Does this practice-based program or treatment improve health outcomes, and for whom does it work for and not work? Does this clinic intervention meet public health or community objectives?

The examples of community-engaged research in the box below illustrate how these questions can evolve into studies.

Examples of UCSF Research Collaborations with Community Clinicians:

The [IDEALL Project](#) (Improving Diabetes Efforts across Language and Literacy) is a case study of translational practice-based research in community health centers.

“[Practice Inquiry](#)” is a set of small-group, practice-based learning and improvement (PBLI) methods designed to help clinicians better manage case-based clinical uncertainty. Evaluation of ongoing clinician involvement in Practice Inquiry, suggests that it is a feasible, acceptable, and useful.

Elevated blood lead levels of pediatric patients at a small community clinic in Monterey, CA [sparked a bi-national collaborative study](#) in which clinician members of a practice-based research network and UCSF researchers investigated sources of the outbreak.

A UCSF researcher and a founder of the [Charlotte Maxwell Complementary Clinic](#) are partnering to conduct a three-year, mixed-method, longitudinal study entitled, “Underserved Women with Breast Cancer at End of Life” to evaluate the effectiveness of a narrative intervention. Four research interviews form the basis for the construction of an ethical will (expressing individual values, beliefs, life lessons, hopes, love and forgiveness in a written document to loved ones) in collaboration with each patient participant, women with metastatic breast cancer. The goal of the intervention is to reinforce dying women’s sense of meaning of their lives and ease concerns regarding death. The secondary aim is to construct a conceptual model that reflects the experiences of breast cancer patients at the end of life.

Atraumatic restorative treatment (ART) was created to treat the dental caries of refugees and poor communities that could not afford dental care. “The Benefits of ART Technique in Vulnerable Populations in US” prospectively examines the caries recurrence and clinical long-term success of ART vs. amalgam restorations in 5 -11 year old children. [The CAN DO Center](#) and [the Marshall Lab](#) at the UCSF School of Dentistry are partnering with [Asian Health Services Dental Clinic](#) in Oakland to find in which situations and applications ART is effective?

2. Why build research partnerships with community clinicians?

Community-based clinics, where the vast majority of Americans receive their healthcare, can become partners in the creation of practice-based evidence. This vision cannot be achieved without greater partnership between researchers and community clinicians.

By necessity, health-focused research developed with input from those in community settings addresses key implementation and feasibility issues that might not otherwise be accounted for. While sometimes challenging to develop, community-engaged research increases the likelihood that research will lead to successful implementation of interventions and changes in health policy resulting in better health outcomes for more people.

3. What are the steps of community-engaged research?

Involving community partners can begin in the earliest steps of the research process. Early engagement helps studies encounter fewer logistical problems and have real and immediate relevance to the community. Partners can work collaboratively to:

- Identify strategic needs of each partner;
- Identify issues of concern to the patient population and clinicians;
- Formulate a research question;
- Write and submit a grant proposal;
- Design and implement the study – collect data;
- Analyze and interpret data;
- Implement results; and
- Disseminate findings.

4. How do I initiate working relationships with clinicians in community settings?

This is one of the most common questions on the minds of researchers contemplating community-engaged research. Entrée is the critical first step of building a working relationship with a clinic partner. Researchers might recruit clinics in a specific geographic location, approach a particular clinic because the researcher and clinician share an interest in a clinical issue, or because the clinician is known to work in a setting that has a special interest in the problem that is being studied. Clinician partners may be recruited because they have a track record of having participated with other researchers on related projects. Sometimes community clinicians contact researchers to begin this exploration process. Community clinicians are likely to be receptive to forming partnerships with researchers who have ties to the community that they serve.

A researcher can get started working with community clinicians in a number of ways:

- Identify other UCSF researchers who have worked or currently are working on collaborative projects with a community clinic partner. Ask to be introduced to individuals and groups that may be interested in developing their relationships with UCSF.
- Identify and approach UCSF clinicians working in a community. Ask them to introduce you to other interested individuals working in clinical settings..
- Identify existing community planning or action groups in the area of your research interest and ask participants if there are clinicians interested in collaboration.
- Contact the CTSI [Community Engagement Program](#) for a consultation!

5. What might I need to know about community clinicians and the community setting?

Clinics often have several types of directors, both formal such as medical or clinic directors, and informal, such as staff supervisors, who will need to know about the ideas for research before they are ready to be implemented. It is important to meet and discuss the research goals and ideas and logistical issues before beginning.

Clinicians want to know first and foremost how their how the clinic and patients will be impacted by the study, whether or not there will be lasting benefits to the clinic, and if they will have to allocate additional staff and time to complete the study protocols. They are generally most interested in interventions and less interested in descriptive studies, although, if a study clearly leads to knowledge that can be used for interventions, there's likely to be interest.

6. What do I need to know about funding and publishing community-engaged research?

Practice-based research partnerships take time to develop and funding is usually scarce for the time it takes to build these relationships. Because multisite practice-based interventions can be expensive and logistically difficult to implement, it is often best for researchers who are new to practice-based research to begin with smaller studies that employ fewer resources and are easier to fund, moving on to larger and more ambitious studies after successful pilot studies have been successfully carried out.

The promising news is that, increasingly, major foundations and federal funders recognize the importance of practice-based research, and more funds are being allocated to practice-based research than ever before. NIH and [AHRQ](#) requests for proposals have specifically called for practice-based research within the context of PBRNs in recent years, and the [NIH CTSA](#) initiative was in part designed to promote more research that takes place in community-based practice settings.

Negotiations about the study design, time requirements, and budget should take place early in the proposal writing process. More information on elements to consider are found in our full Guide.

Authorship and presentations are key elements of disseminating research findings. Because community clinicians who contribute intellectual content to the research can qualify for co-authorship, researchers and community partners should decide up front what role each will have in preparing manuscripts. If

community partners cannot or choose not to be formal co-authors, a published acknowledgement of the contribution of community partners is a good alternative.

7. What are the challenges of collaboration I should think about as I consider research collaboration with a community-based clinical partner?

Some of the obvious obstacles to progress in this area are the time and funding required to establish and maintain mutually beneficial relationships. Collaborative relationships often require a shift from investigator-driven study designs to designs that incorporate meaningful and relevant outcomes and outcomes that overlap with quality improvement efforts clinicians and clinic settings will value.

Your active collaboration in a research partnership means the discoveries you make are more likely to be translated into action and better outcomes for more people.

8. How can the CTSI Community Engagement Program help me find a community organization interested in collaboration?

The [CTSI Community Engagement Program](#) can help you as you take any number of small or large steps at any point(s) along the continuum of engagement with a community clinical partner. The Community Engagement Program can help you consider options for integrating community experience and perspectives into your work. Whether you have a one-time community input forum, convene a Community Advisory Board for the life of your study, collaborate with a community clinic for participant recruitment, or partner with a community clinic as a full collaborator, the CTSI Community Engagement Program can help you navigate community-engaged research.

The CTSI [Community Engagement Program](#) can help you:

- Find a potential collaborator with similar interests;
- Establish a relationship with community-based clinician;
- Manage the steps of setting up a research project with a collaborative partner;
- Explore the degree of involvement that would work best for you.

We ask that you fill out a [Consultation Request Form](#) to help us learn more about you and your interests. After you submit a form, you'll hear back from us within a few days with next steps.

To have a form faxed or mailed to you, please call 415.206.4048
or email CEP@fcm.ucsf.edu.

These UCSF CTSI Guides to Community-Engaged Research are available online for researchers, community clinicians, and community agency staff:

- Collaboration with UCSF Researchers: A Guide for Community Clinicians
- Collaboration with Community-Based Organizations and Agencies: A Guide for UCSF Researchers
- Collaboration with UCSF Researchers: A Guide for Community Organizations and Agencies
- An Introduction to Effectiveness, Dissemination and Implementation Research (PDF)

See: <http://ctsi.ucsf.edu/ce/resources.php#GUIDES>.

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