Summary Brief: Community Health Collaborative Grantee Evaluation
Community Health Collaborative Grant Award Program (2010-2012)

Why this report?
This report summarizes an evaluation of the University of Minnesota's Clinical and Translational Science Institute’s (CTSI) Community Health Collaborative Grant (CHCG) award program and identifies successes as well as recommendations for improvements.

CTSI's community engagement core funds community-university research partnerships through its Community Health Collaborative Grant award program. The program aims to create sustainable community-university research partnerships, support integration of community and university expertise into research projects, and generate long-term community- and university-level outcomes that have potential to impact individual and population health.

What did you do?
The following evaluation guided evaluators as they assessed key components of the CHCG program:

- **Community-University partnership sustainability:** To what extent are community-university Co-Principal Investigator (co-PI) partnerships sustainable following completion of their Collaborative Pilot grant?
- **Community-engaged research process:** How did grantees integrate community expertise into the community-engaged research process? How did community expertise contribute to the pilot grant research project?
- **University- and community-level outcomes:** To what extent have publications and long-term funded research projects resulted? To what extent have broader community and university outcomes resulted?

Who was involved?
Approximately 40 Community Health Collaborative Pilot Grants have been funded through CTSI's Community Engagement to Advance Research and Community Health (CEARCH) core since 2010. This evaluation focused on 23 projects funded between 2010 and 2012. Projects subsequently funded in 2013-2015 are ongoing and will be evaluated using similar, but refined, measures and methods.

CTSI evaluation staff and graduate assistants contacted community and university co-PIs separately to participate in an interview. Overall, 80 percent of co-investigators agreed to participate in an interview, with more university co-investigators participating (87%) than community investigators (78%).

At least one co-investigator from each project participated in an interview. Co-PIs who responded to the request for an interview completed a pre-interview form and participated in a semi-structured interview to describe their CHCG experience and outcomes. Survey data were analyzed using descriptive statistics and interview data were analyzed using theme analysis.
When was it completed?

CTSI conducted an evaluation of its CHCG program between November 2014 and March 2015.

What did we learn?

Community-University Partnerships

- 90% of investigators reported their partnerships were new in that they had not previously collaborated on a research project. Many investigators had prior relationships in previous capacities, such as members of a work group or a task force.
- Just under half of investigators (48%) reported that community investigators initiated the partnership and project. Of the rest, 30% reported it was university investigator initiated, 13% reported their partnership came together jointly, and 9% were unable to remember how their partnership formed.
- Of those investigators interviewed, 65% reported continuing to work together either formally or informally at the time of this study’s data collection. Nearly half (46%) were still working together formally on a research project at the time of data collection and 19% of those described informal relationships, such as providing feedback to each other, consulting on projects, and connecting to potential collaborators.¹
- Many partners were willing to work together but their research project’s outcomes were not promising or they experienced barriers such as lack of time, staffing changes, shifting organizational priorities, and insufficient or subsequent community-engaged research projects. Other partners simply did not work well together and did not want to continue their working relationships. For these partnerships, both community and university investigators described issues such as unequal commitment and engagement by one partner or disagreements about the overall project, vision, and expectations.
- Some community and university partnerships indicated difficulty sustaining their program, project and/or partnership within a pilot project timeframe. The most frequently cited issue was a lack of funding and time to continue supporting the project.

Community Expertise Integration

- The majority of community investigators reported active engagement in the design (80%),

¹ Please note that projects funded beginning in 2012 closed approximately six months prior to data collection for this evaluation. Our evaluation data collection timeline likely contributes to the reported high percentage of partnerships still collaborating for this particular year.
implementation (89%), and dissemination research stages (83%). Fewer community investigators reported participating in the analysis (35%) and interpretation (41%) stages.

- University and community investigators described community investigators as contributing knowledge of the community, access to community contacts and/or a specific patient population, community practice content expertise, such as clinical skills, lived experience with a health issue or disease, and cultural knowledge of a specific community.

- Not surprisingly, university and community investigators described university investigators as primarily providing research methods expertise to the project including research design, community-based participatory research knowledge, qualitative methods, survey measurement, statistical analysis, grant writing, and access to published literature.

**Investigator-Perceived University and Community Outcomes**

- A little over half reported their project resulted in organizational policy changes (63%), public recognition (58%), and additional funding for research projects (58%) and community organizations (53%). Fewer projects (26%) reported specific local and state policy changes resulting due to their projects and 5% reported no outcomes (Figure 1).

- Those investigators reporting organizational policy changes provided examples such as expanding or piloting the project or intervention within other organizations and clinical care practice changes. Examples of reported public recognition include replication of the intervention model, integration of findings into local government planning, and potential legislative policy changes. Highlights include: 1) Minnesota Legislature passed a 2014 bill to address healthcare needs of pregnant incarcerated women and their babies, and 2) Minnesota Department of Health policy recommendation to implement standardized electronic reporting terminology between home care and public health agencies.

- As of spring 2015, this CHCG project cohort resulted in 19 peer-reviewed journal publications and 98 presentations at local, national, and international conferences. Additional dissemination methods used include mass media, blogs, websites, social media, and presentations and newsletters to participants and their families.

![Figure 1. Community and university investigator perceived local and organizational impact: Percent of investigators reporting their community-engaged research project resulted in...](figure)

**Recommendations**

Community and university investigators provided recommendations during their interviews for how CTSI can better support future community-university research partnerships:
**Research Partnership Checklist**: This CTSI-created tool can be completed by grantees prior to and during the partnership to ensure that they are considering and addressing issues that frequently arise during community-university partnerships (e.g., decision-making, communication, accountability, conflict, and data access and ownership). Some investigators recommended requiring completion of the Research Partnership Checklist as part of the CHCG process to help mitigate future issues.

**Research trainings, mentoring, and resources**: Some investigators suggested requiring workshop trainings on community-engaged research strategies and frameworks, such as creating a formal mentorship experience where previous grantees can provide expertise and support. Investigators felt such support would help partners understand how to best address issues and create more effective community-engaged research processes.

**Assess knowledge of community-engaged research prior to application process**: Determine both investigators’ community-engaged research knowledge level to allow the University, CTSI, and CEARCH to tailor support, such as via trainings, mentoring, and consultations, to meet partnerships’ specific needs.

**Relationship-building**: Support formal and informal relationship-building opportunities for partners, including networking events and facilitating ‘check-in’ conversations during the funding period.

**Time and compensation**: Consider ways to better compensate community partners at all project levels for the skills, time, and investment provided to community-engaged research projects. For university partners, review promising promotion and tenure activities that reward community-engaged research efforts.

**Dissemination**: Create opportunities for communities to explore innovative community dissemination efforts either within the CHCG cycle or through other funding mechanisms.

**CTSI Support of Recommendations (Highlights)**

- The Research Partnership Checklist remains a key resource for community and university investigators and is provided to investigators at orientation. They are strongly encouraged to complete it together.
- CTSI’s CEARCH has begun to pilot trainings for current grantees related to community-engaged research including providing available University and external resources that may be useful to their work. In Fall 2015, CTSI also held its first networking event for current grantees and is currently exploring models for offering mentorship opportunities to current partners who may be interested in working with researchers experienced in community-engaged research and partnership development.
- All application processes now require investigators to describe their prior experience with community-engaged research and community-university partnerships. Future trainings, consultations, and mentorship opportunities can be tailored to address specific community-university partnership needs and experiences based on an investigator’s prior community-engaged research knowledge.
- CTSI recently pilot tested the Dissemination and Implementation award program, which provides community-university partnerships with funding to disseminate research findings into the community using methods beyond traditional academic peer-reviewed journals and conference presentations.

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