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BACKGROUND

- Many COVID-19 survivors have long-term complications, yet little is known about post-acute COVID-19 syndrome (“Long-COVID”).
- Collaboration between primary care providers (PCPs), patients, and researchers is essential to discover concerns/strategies for primary care of Long-COVID patients.
- Research training and strategies are needed for engaging practices serving low-income and minority groups to develop research agenda for understanding and exploring care of Long-COVID patients.

AIM

Partner with the Metropolitan Detroit Practice-Based Research Network (MetroNet) to build primary care research capacity to study care of patients with Long-COVID.

METHODS

1. Adapt 3 established research capacity building curricula.
2. Create a stakeholder Advisory Oversight Committee (AOC) to review/advise on curriculum.
3. Train a primary care practice research action council (P-CAC) in the adapted curriculum to identify Long-COVID research priorities.
4. Develop/disseminate replication strategies.

PROGRESS TO DATE

Step 1: Establish AOC

- Researchers, primary care & infectious disease physicians, office staff, and Long-COVID patients (n=7).
- 4 monthly meetings held to date.

Step 2: Adapt/Merge Curricula

- Create map outlining overlap in learning objectives and content of 3 curricula:
 - PCORI Research Fundamentals
 - PBRN Certificate Program
 - BYC Curriculum
- Final adapted curriculum:
 - Integrates concepts/skills from PCORI and PBRN into BYC.
 - Is tailored to primary care and Long-COVID.
 - Consists of 11 modules.
- 4 modules reviewed thus far.

Module	Topic
1	Introductions; “Essential Epid. of COVID-19 in Detroit” - Dr. Phillip Levy
2	Long-COVID: What We Know & What We Don't
3	Introduction to PCOR
4	Engaging in Stakeholder-Driven Research
5	Developing Research Questions in PBRN Setting
6	Research Design
7	Qualitative & Quantitative Methods
8	Sampling, Recruitment, Retainment, & Ethics
9	Dissemination of Research Findings
10	Obtaining Research Funding
11	Utilizing PCOR in Health Care Improvement & Policy

Step 3: AOC Feedback

- AOC Positive Feedback:
 - Content presented in language understood across diverse stakeholder group.
 - Integration of relevant research examples.
 - Opinion polls valued for engaging participants.
- Suggestions for Improvement:
 - Add details to slides (i.e. adding more words/clarifying bullet points, spelling out acronyms).
 - More guidance for polls (shortening handle + providing more visual cues).

Step 4: Establish P-CAC

- 4 MetroNet practices:
 - Henry Ford Clinic, Detroit
 - ProMedica, Monroe, MI
 - ACCESS, Dearborn, MI
 - Wayne Health, Detroit, MI
- Recruit physician, staff member, and Long-COVID patient from each practice.
- First meeting in March, completed curriculum module 1.

Challenges

- Logistics of PCP compensation due to conflicting rules across practice sites.
- No single definition of Long-COVID complicates patient recruitment.

Next Steps

- Literature review on evidence-based strategies for engaging primary care practices in research.
- Develop patient-centered outcomes research (PCOR) priorities focusing on Long-COVID.
- Monthly 2-hour P-CAC meetings:
 - Complete adapted curriculum
 - Concept mapping to identify research priorities and questions
 - Graduation ceremony

CONCLUSIONS

- Collaboration between physicians, patients, and researchers is essential to build evidence base for Long-COVID care.
- Preliminary insights include:
 - Need to balance curriculum content that is understandable to those with less research training yet engaging for those with more experience.
 - Importance of active and experiential learning for engagement and knowledge retention.
 - Need for strategies to incentivize physician time dedicated to community-academic partnerships.

PUBLIC HEALTH IMPLICATIONS

- MetroNet is a platform for primary care practice recruitment into the project.
- Effective partnership among different stakeholders can:
 - Increase awareness/knowledge about Long-COVID.
 - Improve strategies for engaging physicians and patients in patient-centered research with potential to improve health outcomes.