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**OBJECTIVES/GOALS:** We evaluated the implementation of a peer-facilitated research best practices training for Community Health Workers and Promotoras (CHW/Ps) at four new partner sites to increase the capacity and capability of a workforce increasingly involved in community-engaged research. **METHODS/STUDY POPULATION:** Staff were trained using a train-the-trainer model, and materials were disseminated to partners at three academic institutions and one community-based organization. Each site delivered the training virtually or in-person in English and/or Spanish. CHW/P learners at all sites completed online evaluation surveys about the impact of the training on their knowledge and skills for participating in research-related work, and two CHW/Ps from each site participated in follow-up interviews to gather feedback about their experiences. Staff completed fidelity monitoring, follow-up interviews, and three brief surveys regarding feasibility, acceptability, and appropriateness of implementing the training. **RESULTS/ANTICIPATED RESULTS:** The four sites conducted six trainings with a total of 42 CHW/Ps. Two sites each conducted one in-person training in English while the other two sites each conducted two virtual trainings, one in English and one in Spanish. Staff noted facilitators to successful implementation, including providing a facilitator guide and course materials in both languages and tips sheets for navigating REDCap; using the train-the-trainer model; and compensating CHW/P learners for attendance. The primary barrier noted was not having a budget for in-person trainings (e.g., refreshments, printed materials). CHW/P learners reported positive experiences with few suggestions for improving the training. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Preliminary results suggest the research best practices training for CHW/Ps is feasible, acceptable, and appropriate for implementation by partners at academic institutions and community-based organizations, regardless of language (i.e., English or Spanish) or delivery (i.e., virtual or in-person).

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### **A Clinical and Translational Science Awards (CTSA)-specific method to differentiate between translational science and translational research**

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**OBJECTIVES/GOALS:** Our goal was to develop a method for creating a streamlined, Clinical and Translational Science Awards (CTSA)-specific translational science scoring rubric to be used to differentiate between translational science and translational research projects during the pilot proposal review process. **METHODS/STUDY POPULATION:** We created a survey using the 24 Translational Science Principle-based questions sourced from Schneider et al.'s 2023 manuscript in JCTS. Survey respondents were asked to rank the questions from 1 to 24, with "1" being the question that is the most impactful for defining translational science at Penn State. The survey was distributed to our CTSA staff, faculty, and

leadership who are well-versed in translational science across all CTSA Cores. The rankings were averaged per question. The five questions with the most impactful average score were selected to be used to evaluate translational science at our CTSA. **RESULTS/ANTICIPATED RESULTS:** Nine individuals, including faculty, staff, and leadership, across five CTSA Cores completed the survey. The average ranking scores ranged from 6.1 to 20.3. The top five ranked items represented the following four Translational Science Principles: generalizable solutions, efficiency and speed, focus on unmet needs, and cross-disciplinary team science. Importantly, these five items and corresponding translational science principles reflect our CTSA priority areas, the infrastructure support we provide, and the translational research activities conducted at our CTSA. For example, team science is highlighted throughout our CTSA programming, including mini presentations during our CTSA meetings. **DISCUSSION/SIGNIFICANCE OF IMPACT:** This method allows CTSA teams to reflect on their institutional work and share Core-specific perspectives of translational science. This CTSA-specific rubric allows for streamlined translational science pilot proposal evaluation in alignment with site specific CTSA mission and vision.

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### **Physical therapy utilization among WTC Health Program members with cancer**

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**OBJECTIVES/GOALS:** Physical therapy (PT) is a recognized and evidence-based component of oncology care that has been shown to benefit people with various cancers, such as breast, lung, head and neck, thyroid, or prostate cancer. The goal of this evaluation was to determine the level of PT service utilization by World Trade Center (WTC) Health Program members with cancer. **METHODS/STUDY POPULATION:** The Program is a limited benefits federal program that serves responders and survivors of the September 11th attacks in New York City, the Pentagon, and Shanksville PA. Our analyses include enrolled Program members with a cancer certification. Cancer types were divided into two categories, Category A (breast, lung, head and neck, thyroid, or prostate cancer) and Non-Category A (all other cancer types). Data included medical claims, certification, and enrollment data from July 2011 to December 2023. The 2023 Current Procedural Terminology (CPT) code list from the Centers for Medicare and Medicaid Services were used to identify claims associated with PT interventions. Our analyses describe trends in PT claims, CPT codes, cancer certifications by subtype, and number of members with Category A cancers and PT claims. **RESULTS/ANTICIPATED RESULTS:** Since the Program's inception in 2011, PT claims had gradually increased except for in 2020 when there was a sudden decrease, most likely due to the interruption of in-person services due to the COVID-19 pandemic. From 2021 to 2023, PT claims began to increase again. The most common types of PT interventions were therapeutic exercises, manual therapy, and neuromuscular reeducation. In 2023, the most recent year of full data available, Category A cancers made up 38% of all