

Network for Research in Primary Care Settings

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NIH Council of Councils



National Institutes of Health

Office of Strategic Coordination – The Common Fund

Common Fund – Network for Research in Primary Care Settings

Objective: Establish a cross-NIH clinical research infrastructure focused on research in primary care settings

Anticipated Funds Available: \$5M in FY24, \$25M in FY25; anticipate ramp up of ~\$50-100M/year after assessing feasibility and budget requirements

Duration: 2-year pilot phase, 3-year implementation phase

Council Action: Vote for approval of the concept of the Network for Research in Primary Care Settings

Lack of Access is a Major Barrier to Research Participation



- Those that are traditionally underrepresented in research are also often medically underserved and disproportionately impacted by disease and illness.
- Lack of adequate representation compromises the generalizability of research outcomes and compounds health disparities
- There is a critical need to extend research participation opportunities to broader communities with a sustained research infrastructure

Improving Access through a Network for Research in Primary Care Settings

Facilitate and accelerate research advances for adoption and implementation into everyday clinical care and improve health outcomes and advance health equity for all Americans



Network for Research in Primary Care Settings

Goals

Pilot and implement a **primary care-focused** clinical research network that is disease-agnostic, to facilitate clinical research **in mission areas across all ICs**

Integrate innovative research with routine clinical care in real-world settings

Establish a foundation for sustained **engagement with communities underrepresented in clinical research** (e.g., minority groups, rural, elderly, children, challenging SDOH characteristics)

Common Fund Criteria

Transformative

Establish the infrastructure to enable clinical research participation to become an equitable opportunity in routine clinical care

Catalytic

Expand participation by individuals underrepresented in clinical research through sustained and focused engagement

Synergistic/Enabling

Value-added to the mission of all ICs, in particular those without large research networks

Cross-cutting

Address diseases and conditions that cut across the missions of the ICs, and potentially multi-disease endpoints, requiring trans-NIH expertise and coordination

Novel

Serve as a focal point for implementing innovative clinical study designs to improve engagement with and reduce the burden of research on providers and patients

Budget

FY24	FY25	FY26 -FY28
\$5M	\$25M	~\$50M - \$100M/year

Potential IC support 

Series of workshops: Spring 2024



Goal: Obtain input and gain buy-in from key external partners to successfully launch by May/June 2024



Participants:

- Patients and community organizations
- Primary care providers/organizations and community health partners
- Hospital systems
- Research networks
- Federal agencies



Quick Launch in 2024

Year 1: Expand existing studies to increase engagement with underrepresented populations and to enhance accrual and collaboration

Partner with existing networks (e.g., NIH IDeA-CTRN, CEAL) to jumpstart activities

Establish collaborations to integrate clinical data collection into fundamental research studies

Engage primary care sites and community partners on prioritizing and planning research supported by the network

Expand in 2025 and Beyond

Year 2+: Launch new studies across the network and further establish and solidify the network infrastructure

Expand collaborations to integrate clinical data collection into fundamental research studies

Implement innovative practices and trial designs to minimize burden to the provider and patients

Develop and provide training, streamlined regulatory approval and contracting processes, and data and systems to increase interoperability

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