U.S. Department of Health & Human Services • National Institutes of Health

National Center for Complementary and Integrative Health

Overview of the NIH Pragmatic Trials Collaboratory and a Cooperative Agreement

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The NIH Collaboratory Story

History: Initiated through the NIH Common Fund in 2012

Selected as the Pragmatic and Implementation Studies for the Management of Pain to Reduce Opioid Prescribing (PRISM) Resource Coordinating Center in 2019

Goal: Strengthen the national capacity to implement cost-effective large-scale research studies that engage health care delivery organizations as research partners

Vision: Support the design and execution of innovative pragmatic clinical trial Demonstration Projects to establish best practices and proof of concept

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Why Do an ePCT? The 5 Rs

Relevant Question

The question is pressing, and healthcare system leaders, patients, and front-line clinicians care about the answer.

Real-World Setting

Desire to test in diverse healthcare delivery settings with the hope of implementing findings widely.

Representative Population

Ability to recruit a population reflective of patients with the condition, including those from minoritized communities.

Routinely Collected Data

Can use data collected as part of healthcare delivery to answer the question, supplemented by data from other sources.

Rigorous Methods

Randomized research is needed to answer the question and inform changes in care, policy, or reimbursement.

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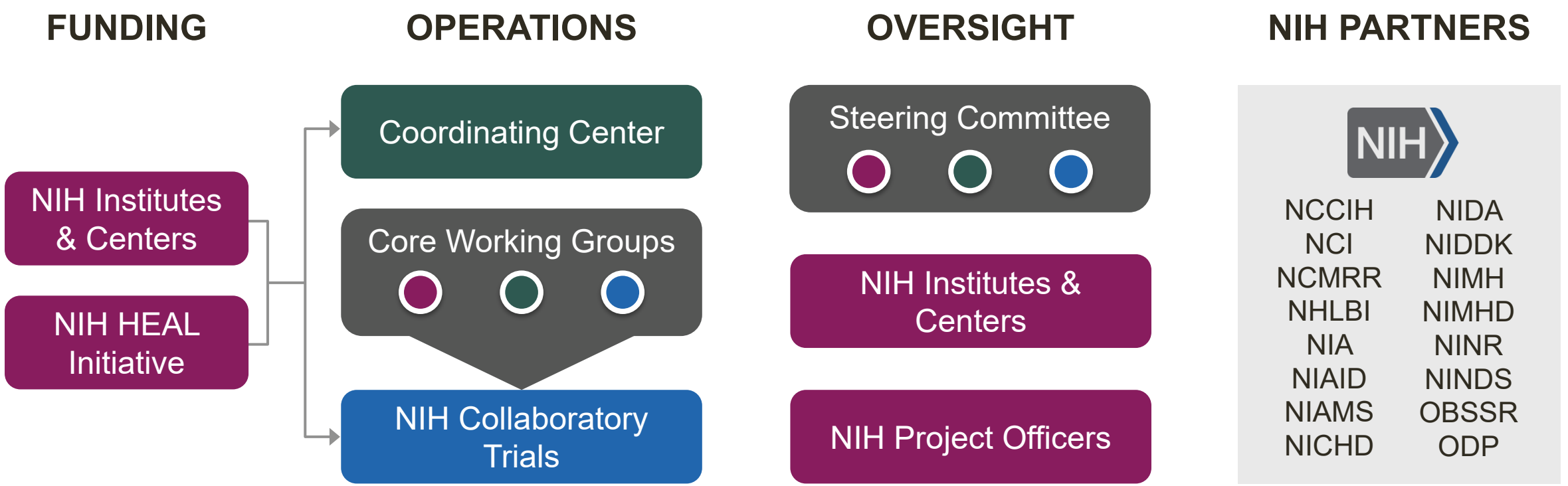
Program Structure



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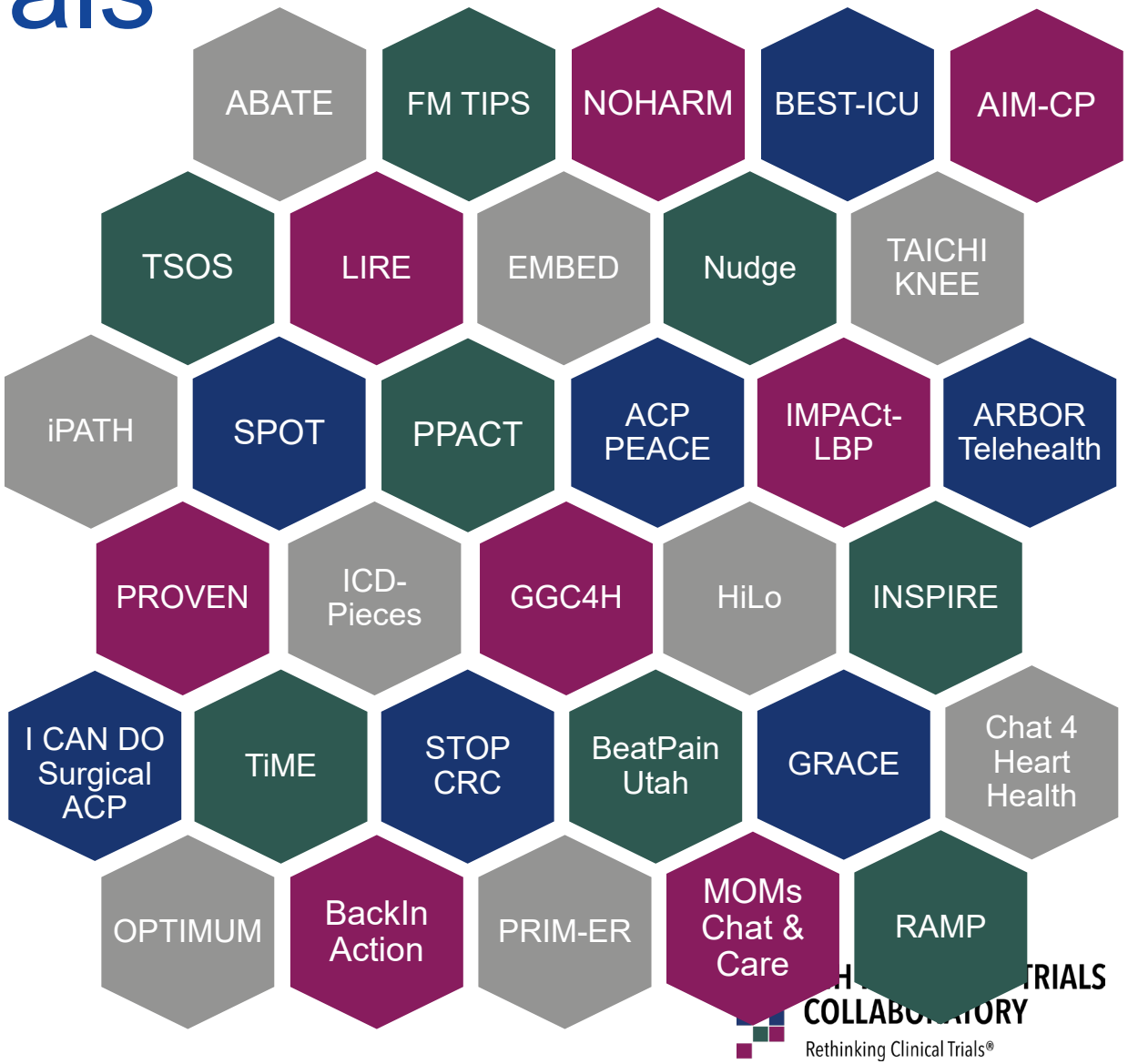
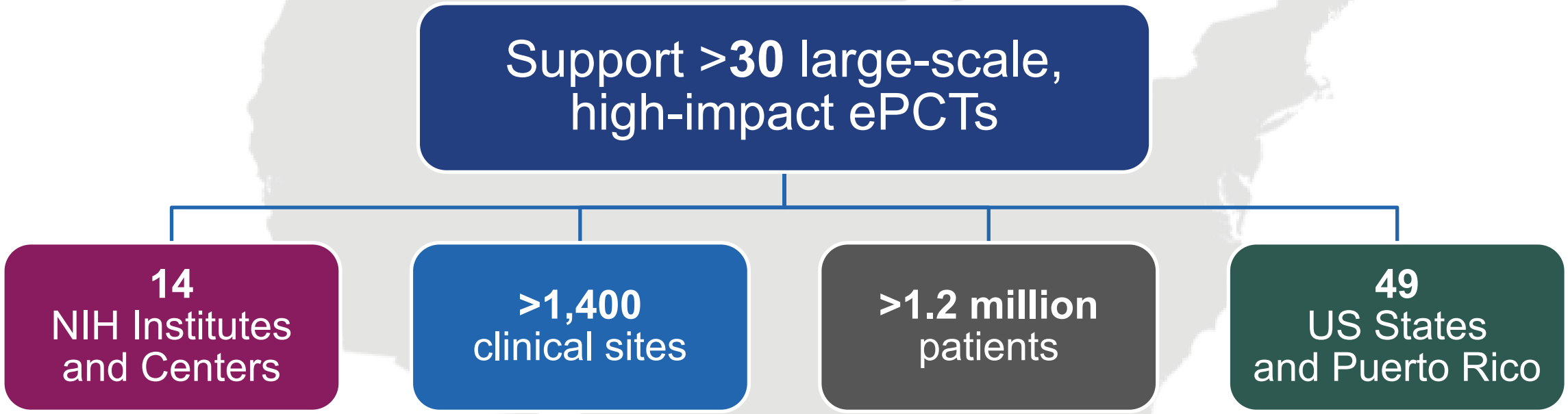
NIH Collaboratory Trials

- ePCTs addressing questions of major public health importance
- Wide variety of therapeutic areas
- Many have phased funding
  - Planning/Startup phase
  - Implementation phase



Program Reach



No sites in Arkansas

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Lessons Learned

- Expected
  - Missing data
  - Staff turnover
  - Decreased fidelity to intervention
  - Evolving HCS
  - ICD9 to ICD10
- Unexpected
  - Staff turnover frequency
  - Impact of intervention fidelity/adherence
  - New EHR launched
  - Time effects (guidelines)–stepped wedge design
  - Availability of data at end

Living Textbook of Pragmatic Clinical Trials

- Comprehensive resource for PCTs
- Content organized around Design, Conduct, Dissemination, and Ethics and Regulatory collections
- Authors from Demonstration Projects, Cores, and partners
- Continuously updated

www.rethinkingclinicaltrials.org

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High-Profile Articles

ORIGINAL ARTICLES

Comparison of Approaches for Notification and Authorization in Pragmatic Clinical Research Evaluating Commonly Used Medical Practices

A guide to research partnerships for pragmatic clinical trials

Cooperative Agreements

What is a U Mechanism?

- U mechanisms – U01, **UG3/UH3**, and U24 – are cooperative agreement awards
  - Used for Investigator-Initiated applications
  - Used by the federal government when the funding agency anticipates federal staff will have involvement in the activities of the award
  - At the time of funding, NIH will assign two staff members to work with investigators:
    1. Program Director/Official who is responsible for the administration of the award, review of progress reports, etc.
    2. Project Scientist who works directly with the investigators as part of the team and participates in trial planning and oversight

Benefits of a Cooperative Agreement with a Shared Coordinating Center

- Allows active partnership between NIH and Investigator Team
- More frequent communication
  - **Program Scientist is part of your team**
  - Tell us what is really going on so we can help
  - Connect you with resources across NIH to resolve challenges and overcome barriers
- Coordinating Center for the Pragmatic Trials Collaboratory
  - Have assisted 28 ePCTs successfully transition and implement
  - Working Groups/Cores set up to address the challenging areas
  - Additional scientific expertise to help your project

What Is a Phased Award?

- Used when the supported research has two distinct phases (e.g., UG3/UH3) with separate aims
- Transition to the second phase is dependent on whether the first phase achieves the negotiated milestones
  - Examples include test and refine data extraction methods; Institute/Center and DSMB approval of study protocol; finalize all training manuals for sites; active participant in PRISM/HCS Collaboratory activities, etc.
- If milestones are met, transition to the second phase of funding occurs after administrative review by funding Institute/Center (may get input from trans-NIH PRISM/HCS Collaboratory Implementation Team)

Transition Process

- Pre-Award negotiation of milestones
  - Want them to be objective
  - Easy to evaluate if they have been met – Yes or No

- Letter from NIH will describe the process
  - Submit per instructions, **2-3 months prior to transition time** (build into timelines)
  - Planning “year” is really 9-10 months
  - Document how you have met milestones
  - Still need to submit progress report electronically on due date

NIH Review Considerations

- UG3 milestones met
- Potential for meeting UH3 milestones
- Participation in Pragmatic Trials Collaboratory Activities
- Input from NIH Implementation Team (possible)
- Fit of UH3 milestones and NIH priorities
- Availability of funds