but are concerned about mutual engagement and reliability in the PRx. Healthcare personnel worry about unmet patient needs and disappointment, and farmers worry about unsold produce and financial losses. Farmers feel that healthcare systems do not understand their operations due to differences in work culture, bureaucratic barriers, and staff turnover, which hinder trust. Healthcare workers want to understand farmers' operations but lack the experience to initiate discussions and to integrate them into their workflow. Both reported that building trust involves having early conversations to establish alignment with their mission and workflows. DISCUSSION/SIGNIFICANCE OF IMPACT: Findings highlight that building trust is crucial for farmers and healthcare personnel in PRx, starting with setting shared goals, recognizing sector differences, and promptly addressing barriers early in the partnership. Future efforts could involve stakeholders in co-design to foster mutual understanding and strengthen PRx implementation.

278

## Evaluating Community Engagement Studios 2.0: Insights from applying an implementation framework

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OBJECTIVES/GOALS: In 2021, Mayo Clinic Center for Clinical and Translational Science (CCaTS) launched CE Studios to enhance community-informed research across a multisite institution. This study applied the Proctor's implementation outcomes framework to evaluate the implementation efforts across diverse settings. METHODS/STUDY POPULATION: From June 2022 to October 2025, we held 59 CE Studios across 19 sites in Arizona, Florida, and Midwest. CE Studios were done in-person and virtually via Zoom. Researchers and community members completed a survey assessing their experience and perceived influence of communities' feedback on the research project. Data were collected and analyzed from June 2022 to October 2025. To assess the implementation, we applied Proctor's Implementation Outcomes Framework, which examines eight constructs: Acceptability, Adoption, Appropriateness, Feasibility, Fidelity, Implementation Cost, Penetration, and Sustainability. RESULTS/ANTICIPATED RESULTS: Thirty (51%) researchers and 286 (67%) community members completed the survey. Both groups indicated high satisfaction with CE Studio planning, format, and facilitation, emphasizing meaningful contribution of community feedback on research. All researchers noted at least one stage of their research was influenced by community input: pre-research (28%), study design (28%), implementation (22%), infrastructure (15%), analysis (1%), and dissemination (6%). Over time, CE Studios requests increased, reflecting recognition of their value in enhancing research. The framework revealed missing structured coordinators' feedback, a key for understanding implementation and highlighted the need to revise evaluation tools and identify additional data sources aligned with the broader framework. DISCUSSION/SIGNIFICANCE OF IMPACT: Applying the Proctor's Implementation Outcomes Framework revealed areas to strengthen CE Studio implementation such as coordinator feedback, refinement of evaluation tools, data source, and strategies to assess CE Studio sustainability and institutional impact. These insights offer a model to guide similar efforts at other institutions.

280

## Community engaged research mentoring: A tailored approach to growing early-stage investigators' capacity and networks in conducting CER

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OBJECTIVES/GOALS: Mentoring is essential for the development of investigators, and while many mentorship programs exist, few focus exclusively on the challenges associated with community-engaged research (CER). This program focused on forging lasting mentoring relationships with CER experts and strengthening connections with community partners. METHODS/STUDY POPULATION: The 9-month program focused on: Exclusive focus on CER mentorship. The curriculum drew on best practices from CTSC partner institutions (Emory University, University of Wisconsin-Madison) and local expertise from the NIH-funded U54 Investigator Development Core. Prior work identified the lack of CER-specific mentorship as a barrier to success, prompting the creation of this dedicated program. Small cohorts with community mentors: Each bi-monthly cohort comprised four mentees and one community mentor, supported by CTSC staff. This structure created a safe space for sharing project challenges and offered grounded perspectives on community-partner needs and expectations. Mentor coaching mentors received targeted coaching, enhancing their capacity to guide mentees and boosting overall mentor satisfaction. RESULTS/ANTICIPATED RESULTS: Evaluation surveys captured satisfaction, confidence, and likelihood of continued participation. Key findings include * High Satisfaction: Both mentors and mentees reported strong satisfaction with program elements. * Skill Development: Mentees cited support across project design, grant development, networking, and policy work. * Future Participation: 100 % of mentors and mentees indicated they would join again or recommend the program to colleagues. * Community Impact: Participants highlighted the program's sense of community, passion, and peer support. DISCUSSION/SIGNIFICANCE OF IMPACT: This CER mentoring program addresses a critical gap: traditional career mentors often focus on clinical or academic specialties, overlooking the unique challenges of building equitable community partnerships. By centering mentorship on CER and incorporating coach-driven mentor development, the program fosters bidirectional growth.

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