in the community and working together to design and deliver solutions.

METHODS/STUDY POPULATION:

- Identify measures in the 3 domains of vulnerability, health and assets for the targeted neighborhoods and conduct bivariate descriptive statistics and multivariable regression analyses to investigate association between measures of vulnerability and health outcomes.
- Initiate relationships with leaders and residents in targeted neighborhoods.
- Locate organizations working in targeted neighborhoods through online mapping software and word-of-mouth at neighborhood events, and created a spreadsheet with contact information.
- Conduct multidisciplinary assessment (i.e. key informant interviews, focus groups, town hall meetings) of the targeted neighborhood.
- Iteratively synthesize assessments to develop areas of interest and relevance to the community.
- Develop a road map for solutions identified by the community.

RESULTS/ANTICIPATED RESULTS: The results from the environmental scan conducted will be displayed in a report and visual “map” of health outcomes and health determinants, including assets and barriers for the targeted neighborhoods. The research team will use results from the environmental scan coupled with listening activities including attendance at community events, key informant interviews and focus groups to develop relationships and strong collaborations with the targeted neighborhood stakeholders. The relationship building between the research team and community will provide increased trust and engagement that will further enhance the effectiveness of the assessments completed with the targeted neighborhood. The assessments will help to empower communities to develop sustainable solutions and drive future work that will lead to future grant applications and larger-scale implementation in other community impact hub neighborhoods. DISCUSSION/SIGNIFICANCE OF IMPACT: Through the community impact hub work, we will develop collaborative efforts with targeted neighborhoods with the greatest health inequities in the Marion County area. In partnership with these neighborhoods, we will build a foundation – a network of community collaborators and a focused plan – upon which we will improve the health outcomes of residents while learning best practices on how to do so.

METHODS/STUDY POPULATION:

- Aaron E. Carroll, is the director of Education and Workforce Development for the Indiana CTSI and a popular writer covering health, research, and policy for The New York Times. He is host of the Indiana CTSI-sponsored Healthcare Triage podcasts as well as the Healthcare Triage YouTube show, with 340,000 subscribers. We will leverage his audience and research expertise to grow the Indiana CTSI podcast participation and increase audience engagement.
- We will eventually allow the nation-wide network of CTSAs to pitch guests and shows covering Translational Research, and invite local CTSA leadership or faculty to participate in the podcast.

RESULTS/ANTICIPATED RESULTS:

- Utilizing quantitative analytics, we expect to see a significant increase in podcast downloads and listeners as we expand our offering to other CTSAs, beyond Indiana.
- We expect that the CTSI-wide podcast will increase the nation-wide level of knowledge and understanding of NCATS, translational research, and its benefits to society and healthcare.
- We anticipate, through this expanded podcast offering, a growing number of community members who are informed and engaged on the topics of translational research, clinical and translational sciences and beyond.

DISCUSSION/SIGNIFICANCE OF IMPACT:

- Podcasts are a convenient, portable, and efficient form of science communication.
- Podcasts also make information personal and offer us an excellent and innovative communications vehicle to spread the word about translational research, as well as the excellent work happening at each of our CTSAs.

**4475 Meeting Partners Where They Are: Tailoring Community-Engaged Research Consultation Services**

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OBJECTIVES/GOALS: One of the most significant challenges to community engagement experienced by Clinical and Translational Science Award (CTSA) institutions is inadequate capacity of academic and community partners to engage in collaborative research. Several CTSA’s within the consortium provide consultation services to help address this gap. METHODS/STUDY POPULATION: For over 10 years, the Michigan Institute for Clinical and Health Research (MICHR), a CTSA at the University of Michigan, has provided CEnR-specific consultations to partners seeking support for a variety of needs. Consultations can be requested for assistance with identifying potential partners, developing partnership infrastructure, finding CEnR funding opportunities, and incorporating CEnR
approaches into research plans. When a consultation is requested, MICHR’s Community Engagement (CE) Program responds by planning a meeting with staff and faculty who have relevant skills, expertise, and connections. After the initial meeting, the CE Program provides follow-up communication and support based on the needs of the specific request, and often facilitates connections with potential partners. RESULTS/ANTICIPATED RESULTS: The two most frequent types of consultation requests involve 1) making connections with potential researchers or community partner organizations, and 2) providing guidance on research grant applications that involve community engagement. MICHR provides approximately 50 CEnR consultations each year, which have resulted in development of new partnerships, grant submissions, and research projects that utilize CEnR principles and address community-identified health priorities. DISCUSSION/SIGNIFICANCE OF IMPACT: This presentation will describe the evolution of MICHR’s CEnR consultation process and highlight successful outcomes and lessons learned over its 12-year history. CONFLICT OF INTEREST DESCRIPTION: NA

Museum and Arts-Space Programming Intended to Improve Health: Interim Survey Results
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OBJECTIVES/GOALS: Many museums and art spaces conduct programming intended to improve health outcomes, but arts professionals’ perceptions of these programs are not well known. This study describes arts professionals’ experiences with museum and art-space interventions intended to improve health. METHODS/STUDY POPULATION: A 14-item digital Qualtrics survey was administered to museums and arts organizations selected using snowball sampling. The survey was sent to a range of arts and cultural organizations and professional membership bodies in the US and UK. Survey questions assessed the range of audiences involved in health programs, what types of activities museums and arts organizations are offering to support health outcomes, and how programs are evaluated. RESULTS/ANTICIPATED RESULTS: From 10/30/19-11/19/19, 151 surveys were completed; 66 respondents (44%) have a museum/arts in health program. Common target populations include individuals with mental health concerns (33, 22%) and older adults (26, 17%). Improving well-being (56, 37%) and social isolation (50, 33%) were the most common intended outcomes. Respondents reported using a variety of program evaluation methods including formal (23, 15%), informal (31, 21%), and anecdotal (37, 25%). Interviews are planned with a purposive sample of respondents conducting, or interested in conducting, a program for individuals with chronic pain and those formally evaluating their programs. DISCUSSION/SIGNIFICANCE OF IMPACT: Interim survey responses indicate many cultural organizations engage in programming intended to improve health outcomes. Understanding the cultural sector’s current efforts to improve health represents an initial step in translating these efforts into effective intersectoral research partnerships.