framework for prioritizing and developing the sequence and timeline for supporting elements in aligning their evaluation methods with CQI. The scoring sheet assessed: 1) impact – defined as the results from completing the task and implementing enhancements; 2) effort - defined as the amount of resources (time, personnel, and materials) needed to complete the tasks; 3) reach - defined as number of individuals (e.g., CTSA employees, members, researchers, trainees, and community members) impacted by the tasks or products of the tasks; 4) urgency – defined as a task that is time-sensitive due to a deadline and has a clear consequence if not completed on time. Each component was assessed using a 3-point scale (e.g., minimal, moderate, and high). RESULTS/ANTICIPATED RESULTS: In Fall 2024, the CCTST evaluation team met with respective elements to collect data on their: 1) need from the evaluation team to support aligning their evaluation methods with CQI, 2) challenges and barriers to improving evaluation and aligning with CQI methods, 3) number of hours per month available to support improving evaluation methods, and 4) current resources to dedicated to conducting an evaluation. Next, the evaluation team will transcribe the data from the meetings and code the data into the scoring sheet for each element. The scoring sheet is anticipated to produce a score that will be used to develop the sequence, timeline, and initial tasks for supporting elements in improving evaluation methods and aligning with CQI over the first year of the UM1. DISCUSSION/SIGNIFICANCE OF IMPACT: CTSA hubs' evaluation teams operating at full capacity may encounter barriers to implementing CQI efforts. This systematic approach assessing the impact, effort, reach, and urgency to sequence evaluation and CQI alignment - can support evaluation teams by ensuring a balanced workload and optimizing operations for quality improvement.

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Visualizing impact: Operationalizing community engagement evaluation using the RE-AIM framework

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OBJECTIVES/GOALS: We operationalized our evaluation using the RE-AIM framework, by defining its dimensions as nodes within a net effect diagram in the form of radar charts to visually display group variation among nodes. This enhanced our ability to measure the reach, effectiveness, and implementation of our efforts in underresourced Los Angeles communities. METHODS/STUDY POPULATION: We applied the RE-AIM framework to guide the operationalization of evaluation methods, defining the RE-AIM dimensions generally with a focus on reach, effectiveness, and implementation. We developed and defined a standardized scoring system for metrics that contributed to the RE-AIM dimensions of focus, using data from our activities such as health education workshops targeting diverse, under-resourced populations in Los Angeles. Our standardized scoring system ranged from 1 to 5, reflecting the degree of success within each metric/dimension. Scores were mapped in net effect diagrams in the form of radar charts to enable comparative analysis and visualization, highlighting a variety of grouped variables (i.e., language, locations, and adaptation). RESULTS/ANTICIPATED RESULTS: The operationalized and developed scoring system allowed us to standardize assessment across the RE-AIM dimensions, making it possible to visualize our impact through net effect diagrams. These diagrams illustrated variations in reach, effectiveness, and implementation across

different community engagement activities stratified by group variables, providing insights into our impact and areas for adjustment. Preliminary results suggest that the net effect diagram effectively captures both broad and nuanced impacts and serves as a viable application of the RE-AIM framework. The use of standardized scoring enhances data comparability and offers a dynamic visual tool for monitoring ongoing and future initiatives while serving as a tool to display and report our impact. DISCUSSION/SIGNIFICANCE OF IMPACT: Operationalizing evaluation with the RE-AIM framework and implementing a standardized scoring system allows us to visualize and monitor effectiveness in real time. This system supports data-driven decision-making for our sustainable, impactful community engagement initiatives ultimately contributing to our goal of improving health equity.

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Opening up translational data impact through the Data Citation Corpus

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OBJECTIVES/GOALS: Evaluate use and reuse of data in biomedical fields to explore how data advances translational benefit for science and patients. METHODS/STUDY POPULATION: In this study, we use the metadata for 5 million data citations in the Data Citation Corpus as a source to analyze the use of datasets from biomedical fields across a number of facets, including date, affiliations, and funders. We identify examples of datasets that have been used across different research fields by analyzing the disciplinary scopes of the datasets and the publications that cite them and explore patterns of reuse of datasets beyond the original research project from which it was created. RESULTS/ANTICIPATED RESULTS: The analysis will provide insights into datasets showing broad usage in biomedical fields, the patterns of data use over time, and the affiliations and funders associated with highly used datasets. The analysis will also dive into examples of datasets showing use across different fields and usage beyond the original project. The results will showcase examples of valuable datasets in translational research and serve as a basis for exploring different considerations around the impact of open datasets. DISCUSSION/SIGNIFICANCE OF IMPACT: The exploration of data citations will provide insights into open data showing translational reach and an example of how the Data Citation Corpus can support evaluation of the impact of research data.

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Beyond bibliometrics: Altmetric analysis as an early signal of the impact of the National Center for Advancing Translational Sciences (NCATS) Clinical and Translational Science Awards (CTSA) Program

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OBJECTIVES/GOALS: To identify and characterize future potentially high impact research generated by the Clinical and Translational Science Awards (CTSA) Program, we evaluated the Altmetric Attention Scores (AAS) of recent articles associated with the Program and conducted an initial assessment of the attributes associated with high AAS for Program articles. METHODS/STUDY POPULATION: We used the NIH Query, View, Report (QVR) tool to identify recently-published scientific papers that cited