OCHIN-ADVANCE ENGAGEMENT AND RECRUITMENT OVERVIEW

Updated October 2025

Welcome to the OCHIN collaborative! We are a non-profit health information technology company serving over 267 health systems, including community health centers (CHCs), county health departments, and independent clinics in 40 states. OCHIN leads the ADVANCE Clinical Research Network and provides core engagement infrastructure for ADVANCE as the nation's largest CHC-focused research network.

As a dispersed collaborative, our membership spans a variety of organizational structures, patient populations, and community resources. We work to align research projects with member priorities and interests, encourage and facilitate research participation, and demonstrate research value and impact to our members. Below is an overview of OCHIN member recruitment and engagement processes that may be relevant in developing your proposal.

OCHIN RECRUITMENT AND MEMBER PARTICIPATION

Organizations using OCHIN's hosted Epic electronic health record (EHR) contribute to research through data sharing in the OCHIN and ADVANCE research data warehouses and voluntary participation in practice-based research projects. If your research includes patients, clinic staff, care providers, or health organization leaders as participants, you will need to first recruit OCHIN member organizations. Member organizations will review the opportunity, associated activities and expectations, and available supports (e.g., financial support, training, practice facilitation) to determine their participation before recruitment of individual participants can begin.

Recruitment for funded studies with impact on routine clinic operations such as qualitative interviews, patient recruitment, coaching, training, or implementation components follows a series of steps:

LEVEL 1: STUDIES WITH CLINIC IMPACT

- OCHIN Research approaches eligible member organizations about study participation
- Organization agrees to take part if interested, identifies eligible sites and needed contacts

LEVEL 2: STUDIES WITH PATIENT, STAFF, CLINICIAN, OR OTHER PARTICIPANTS

- Clinics advise on best strategies for OCHIN-facilitated study recruitment
- Recruit individual patient, clinic staff, and provider participants

Recruitment and engagement activities are usually managed by a Research Associate in collaboration with the OCHIN site investigator. The Engagement Core can provide consultation and support as needed. The Research Associate works with the study team and member-facing OCHIN teams (Account Managers, Clinical Informatics, Practice Coaches) to develop and implement recruitment plans, maintain associated tracking, lead health center outreach and navigate execution of participation agreements, manage recruitment, and maintain engagement across study activities. Research Associate effort is allocated according to individual project needs, complexity, and size; typically ranging from 10-40% additional FTE for each study year with recruitment and engagement activities.

Engagement and recruitment activities within OCHIN are guided by our membership to ensure alignment with their priorities, capacity, and needs. ***OCHIN does not pre-recruit member organizations at the proposal stage and will only begin recruitment after a study is funded and has IRB approval.*** This is consistent with our member business agreements and minimizes member research effort to focus on viable opportunities for which they are eligible. This also allows for post-award adaptations based on the actual number of eligible organizations, clinic sites, or any other criteria for eligibility and participation.

Recruitment time varies by study design, necessary activities, and sample size. Estimated timelines are listed below:

▪ Recruitment planning, material development, and IRB approval	2-3 months
▪ Service area and clinic recruitment	3-6 months
▪ Clinic-informed provider, staff, and patient recruitment	2-9 months

As voluntary participants, member time on research activities is acknowledged through OCHIN-set clinic impact payments. Payments recognize the effort and contributions clinic staff put into project participation; they do not compensate for the time or resources needed to participate. OCHIN sets and reviews our impact payments annually based on a percentage of average daily operating costs for community health centers. Projects with higher impacts may require additional budgeting for health center payments such as clinic staff FTE or consultant fees.

SURVEYING OCHIN MEMBER ORGANIZATION CLINICIANS, STAFF, OR PATIENTS

Surveys can be a useful approach to gather information and perspectives from organizations, clinicians, staff (e.g. operational leaders, quality improvement leads, care managers), or patients served in the OCHIN network. To be effective and attain reasonable response rates, survey activities must be adequately resourced to easily administer, align with members' priorities and interests, and recognize members' time and effort in participating.

Survey recruitment follows our standard recruitment process, including budget for relevant impact payments. Clinician and staff surveys may be conducted by mail, electronic formats, or phone. Depending on the tool, format, topic area, eligibility criteria, and targeted sample size, we will work with you to plan survey recruitment and data collection activities.

OCHIN ENGAGEMENT WORKGROUPS AND CONSULTATIVE INPUT

The Engagement Core facilitates patient and caregiver, provider, and clinic staff input to research through the OCHIN-ADVANCE Patient Engagement Panel (PEP) and OCHIN's practice-based research network (PBRN). The type and frequency of PEP and PBRN input to proposals and projects depends on many factors, including study topic, funder requirements, and study design. The PEP and PBRN workgroups can provide input on study impact and value, feasibility issues, participation, dissemination activities, and implementation strategies. We strongly encourage engaging patients, caregivers, providers, and clinic staff in proposal development and project conduct as a crucial mechanism for providing representation from the communities and CHCs served through the OCHIN collaborative.

The research Engagement Core can advise on how to get the most out of engaging with the PEP or PBRN, aligning engagement approaches with your proposal or study design, and planning and facilitating consultative or collaborative engagement activities with workgroups or advisors. Your team will be responsible for creating content and materials, managing costs and reimbursements, and providing any requested follow-up. We can work with you to tailor your request, plan, and materials as needed.

OCHIN-ADVANCE Patient Engagement Panel

The OCHIN-ADVANCE Patient Engagement Panel (PEP) is a dedicated group of individuals who advise on research and the way it involves and impacts patients and caregivers. PEP members have experience receiving and navigating care in community health center settings and share their lived experiences as patients, family members, caregivers, community members, and advocates. The PEP provides consultation on proposals, studies, and initiatives from development through dissemination. Consultation is designed and facilitated to provide conscientious, feasible, and sustainable outcomes for community health centers and the people they serve.

The PEP includes 15-18 people from across the US. Members meet remotely every two months and are available for input on an ad hoc basis between meetings. Many PEP members also serve as panelists or advisors on individual OCHIN research projects.

Practice-based Research Network

Routine PBRN input to study teams’ clinic-based research questions, evaluations, and findings is available through standing OCHIN workgroups. OCHIN’s Clinical Operations Review Committees (CORCs) are the primary source of consultation with the majority of research input coming from the Ambulatory CORC. Other CORCs include behavioral health, dental, acute, and pharmacy care. Depending on your proposal or study, the Engagement Core can help connect or direct you to other workgroups as needed.

The CORCs focus on development, review, testing, and implementation of OCHIN Epic clinical tools and workflows. CORC members comprise clinical, billing, operations, administrative, and quality improvement staff across regional and clinic settings within OCHIN. The Ambulatory CORC meets remotely twice a month and is readily accessible for short consultations, calls for recruitment, project updates, and dissemination activities.

Guidance for consulting with OCHIN member clinicians and staff

CORC and other workgroup consultations are strictly advisory and may not be used or treated as data collection activities. Proposal and study teams may conduct brief (5 items or less) polling exercises to solicit feedback or advice as a supplement to a CORC presentation and discussion. Calls for health center recruitment may be shared at CORC meetings but the CORCs may not be used to recruit member clinicians or staff as individual study participants.

FURTHER INFORMATION

For more information, please contact researchcollaboration@ochin.org.

For general information about OCHIN Research, please visit OCHIN Research | OCHIN.org and explore the OCHIN-led ADVANCE Clinical Research Network at www.advancecollaborative.org.