Q: What is the Learning Health Systems Demonstration Program?

A: ICTR's Demonstration program is an opportunity for UW Health clinicians to receive funding for evidence-based, data-driven interventions to improve care outcomes in inpatient settings. Under the LHS demonstration program, Principal Investigators work on an improvement project as one half of a dyad with a UW Health system operational partner to address patient care improvement opportunities identified by the health system, then implement and scale up their interventions safely and effectively. Guided by the Quintuple Aims of Healthcare, these demonstration project dyads champion the rapid deployment of proven interventions to address health system care gaps using the resources available to them in ICTR. This program is funded by NIH through the ICTR Clinical and Translational Science Award (CTSA).

Q: Can there be a Co-PI?

A: Yes, however at least one of the PIs need to have 20% of their salary bought out and a letter of support from their Department or Division Chief documenting this. In a best-case scenario, the second PI would have a percentage of their salary covered by the grant as well.

Q: How would PI's salary be calculated?

A: We follow the NIH guidelines for SMPH salary.

Q: Can additional clinical staff be funded with the LHS award?

A: Yes, as long as they are a UW employee.

Q: What kinds of roles would serve as a UW Health lead for a project?

A: They could occupy a variety of roles. However, the best positioned roles to help support an LHS project are Project Managers, Senior Data Analysts, and other operational managers who are involved in the daily work needed to support the project. The UW Health lead does not—in fact, should not—be someone in a health system leadership role.
Q: We are having difficulty identifying a UW Health lead to serve as a dyad partner for our project. Are there people within my division or department who can help connect me with appropriate potential partners?

A: Some division/department roles that could potentially help you identify an appropriate partner on the UW Health side are your Quality Improvement Vice Chair or Director, Vice Chair/Director of Research, or an Epic/EHR Data Manager.

Q: We are clinicians. Should we add a researcher to our team to help us develop this proposal?

A: It’s always a good idea to add a researcher to your project.

Q: How much does ICTR offer in terms of assistance in developing the proposal?

A: ICTR will make many of our programs and services available to assist with your proposal, from Protocol Development to our Biostatistics, Engineering and Research Design scientists. It is important to keep in mind, however, that these projects should be designed as toward quality improvement project rather than as traditional research studies. Valuable implementation/QI research can and should arise out of the data being generated and analyzed in the QI project but such research is secondary to the primary purpose of the LHS demonstration project.

Q: Do you have examples of LHS projects you can share as models?

A: Following are some effective examples of LHS projects/research at work:

- **Regional Process Redesign of Lung Cancer Care: A Learning Health System Pilot Project**
- **Effect of a Real-Time Electronic Dashboard on a Rapid Response System**
- **Assessing the cognitive and workload of an inpatient safety dashboard in the context of opioid management**