Collaborating to Create

Opportunities for Transformative Care











Contents

Welcome

4 CommonSpirit Health Research Institute

National Map

6 Our National Presence

Who We Are

8 Research By the Numbers

The Research Institute	
Research Operations	. 12
Research Analytics Center of Excellence	. 14
Research Finance	. 16
Office of Research Integrity and Compliance	. 18
Office of Sponsored Programs	20
2023 CommonSpirit Research Summit	.22
Research Award Honorees	.24
CommonSpirit Health Divisions	20
Northern California, Bay Area	
Northern California, Sacramento	
	. 32
Midwest, Nebraska and Southwest Iowa	
Midwest, CHI Health Clinic Heart Institute	.36
Pacific Northwest	.38
Southeast, Arkansas	40
Southeast, Kentucky	.42
Southeast, Tennessee	
Texas	.46
Clinical Service Lines	
Cardiovascular Research	
Neurology Research	.52

Oncology Research	54
Womens and Infants Research	56
Patient Story	. 58
Our Clinical Partners	
Nursing	. 62
Pharmacy Enterprise	. 64
Physician Enterprise	
Precision Medicine	. 68
Student- and Resident-Based Research Academic Facilities	72
	70
Baylor Creighton	
Morehouse	
Partner Institutes	
Barrow Neurological Institute	. 86
Patient Highlight	.88
Benaroya Research Institute	.90
Partner Networks	
NCORP	. 96
PCORI HSII	00

Philanthropic Support

102 REEF

Making a Difference

106 Lloyd H. Dean Institute for Humankindness and Health Justice

Our Future

108 Looking to the Future

110 Board of Directors and Institute Leadership

112 Meet the Team

Welcome

Welcome to the second Annual Report of CommonSpirit Health Research Institute. In this report, we provide an in-depth look at the transformative research being done throughout the CommonSpirit enterprise.

Our work in FY23 was marked by a steadfast commitment to collaboration — collaboration among our clinicians, collaboration within our Research Institute team members, and collaboration with other health care providers, academic institutions and industry partners. Research cannot be done in a vacuum. By partnering with each other and with others outside of CommonSpirit, we have been able to harness the power of innovation.

This past year has also been a time for us to pursue the efficiencies and standardizations that we believe will move us closer to being one unified CommonSpirit. Our success depends on consistency in our approach, not only in how we provide care, but also in the processes and reviews that are so crucial to the work of research. This uniformity not only improves our efficiency, it also helps us avoid pitfalls in our highly-regulated environment.

While this journey to unity is not new, in the past year it has been accelerated, thanks in large part to CommonSpirit Health's new CEO, Wright Lassister III. Under Wright's leadership, our journey to One CommonSpirit is already yielding success. Perhaps nowhere was this unity more evidenced than during our incredibly well-received Research Summit which took place in February. The Summit proved to be an empowering moment for our teams from throughout the ministry. It concluded with consensus around common goals, and an excitement and optimism for the future of our Institute and our field as a whole.

We are proud to share with you the incredible work done by dedicated the teams throughout CommonSpirit. Together, we are confident we will continue to create new opportunities to transform care.



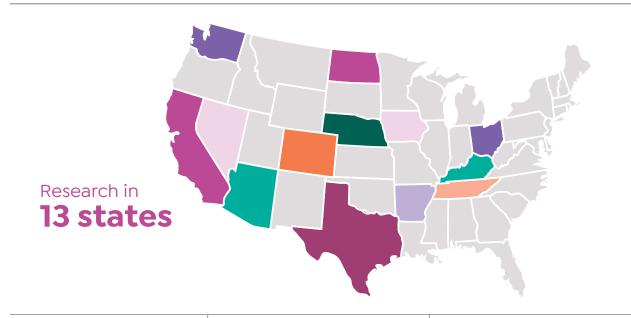
Vani Nilakantan, PhD System Vice President, Research CommonSpirit Health Research Institute



Robert Wiebe, MD, MBA, MPH Ex Officio Board Member Executive Vice President and Chief Medical Officer



Through collaboration, our research creates opportunities for transformative care.



26Teaching Facilities



733 Protocols

325 Data Studies **408** Clinical Trials **4,543**Participants in Clinical Trials



3587 enrolled

956 in treatment

None of us, including me, ever do great things. But we can all do small things, with great love, and together we can do something wonderful. – Mother Teresa (Saint, 1910–1997)

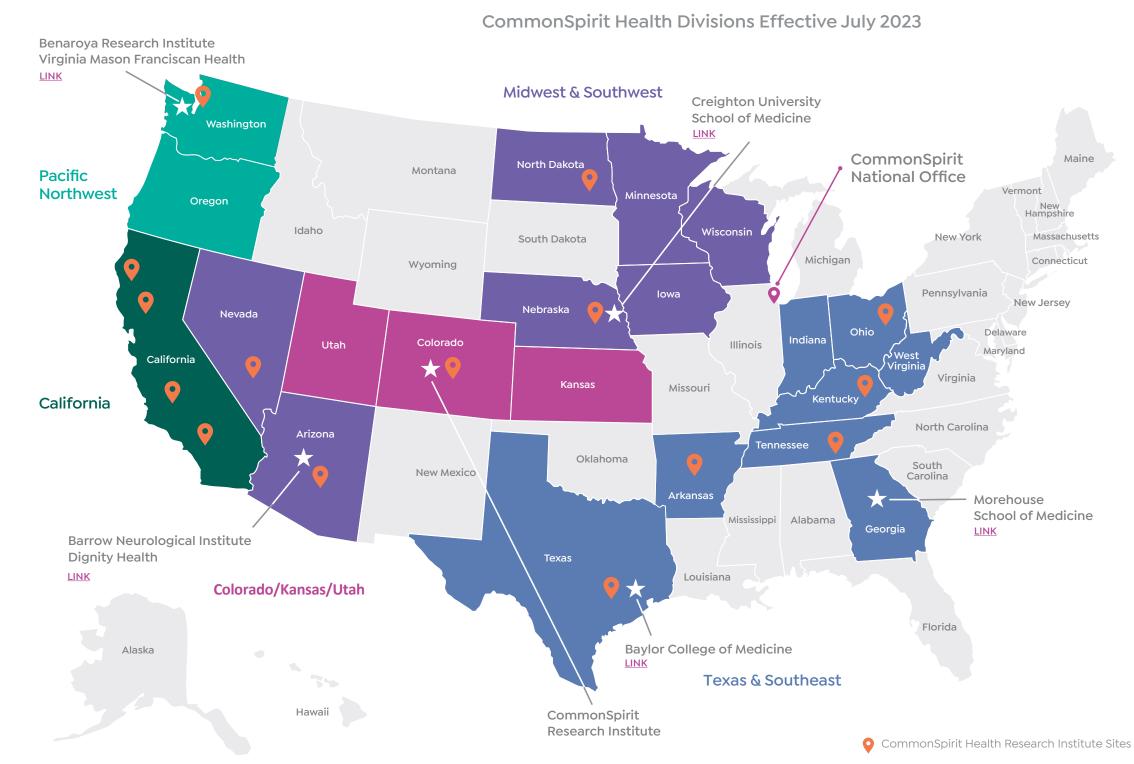
Our National Presence

CommonSpirit Health Research Institute's footprint is vast, covering much of the country and encompassing clinical work performed at universities, hospitals and clinics in urban and rural communities.

The vision for the CommonSpirit Health Research Institute is to be a nationally recognized leader in innovative research, transforming health care for the communities we serve. Pursuing research, innovation and discovery with the goal of finding new ways to provide timely and effective treatment for patients is our fundamental value.

We believe research provides opportunity – an opportunity to find a cure, an opportunity to improve quality of life, an opportunity to improve health care for the next generation, and an opportunity to provide access to health care for all regardless of race, gender or socio-economic status. Connecting patients with this opportunity is a basic tenet of humankindness.

This map reflects CommonSpirit Health's new division structure, which took effect at the beginning of FY24. The data and information shared in this report is reflective of research work done in FY23 prior to this division realignment.



Who We Are

Contracted to provide services to all CommonSpirit Health community hospitals and clinics, CommonSpirit Health Research Institute follows a standard research review and approval process for all facilities engaged in research. The Research Institute manages this process when any research endeavor requires access to CommonSpirit patients, patient data, employees, medical staff, health care services and/or use of our campuses.

Research by the Numbers



Total CommonSpirit Health Studies: 733



Study Sponsors: 31



Research Areas: 8

Contributors by Division

24.5% Northern California

17.3% Southern California

14.39% Pacific Northwest

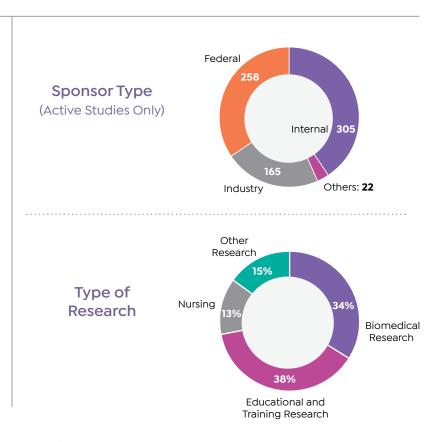
National Office/System

9.43% **Midwest**

8.93% Southeast

Southwest

7.2% | Texas





CommonSpirit Health Research Institute | Shared Services

LINK

Office of Research Integrity and Compliance

Office of Research, Sponsored Programs **Grants and Contracts**

Office of Research Finance and Accounting

Office of Research Focused Operations

Mary Rydman

Research Site

Operations

Research

Research

Participant

SOPs

Enrollment

Investigator

· Compliance to

Managers

Coordinators

System Director

LINK

R.A.C.E. **Research Analytics** Center for Excellence

LINK

Russell Stolp, IRB System Manager, and Lauren Bacon, QA System Manager

- · Federal Wide Assurance
- · IRB (internal and external)
- · Privacy Board Reviews • IIR, GME and

Student Research **Quality Assurance**

- COI Reviews
- · Post Approval Monitoring NCORP Monitoring
- CAPA
- Regulatory Affairs

Training and Education

- · Staff Training and Onboarding CITI
- Education
- · Policies and
- Procedures

LINK

Julie Link, System Director, and Terah Hardcastle, System Manager, Research Programs

- Master CTAs/
- Agreements · Single site CTAs/ Agreements
- Just In Time Contracts
- Comprehensive Contracting Services (DUA, BAA, CDA etc)

Grants

- Research Grants
- Federal Grants
- Foundation Partnership
- Policies and Procedures

NCORP

- Program Management
- Centralized Regulatory
- Centralized contracting
- Infrastructure

Melissa Aigner System Director Support

· Financial Clinical Trial compliance

- oversight, which is a focus of the OIG
 - · Research Clinical Trial Budget Management &

Research

Clinical Trial

Financial

Reporting

Operational

Finance

· Signal Path

Finance

Revenue Cycle

Management

- Negotiation Medicare
- Coverage Analysis Support (MCA) CTMS · Clinical Trial Implementation
 - **New Business** Development
 - Preliminary Clinical Trial Feasibility
 - Recruitment of PIs
 - Study Implementation with New Site Onboarding

LINK

Vino Raj, MD Data Scientist

Data Support Tools

- CTMS
- REDCap
- · PI Tools Analytics
- Statistical Tools · Clinical Trial
- Operation Insights

Data Lakes for Research

- Data Extraction
- ETL and Governance
- Registry Integration

Al and Machine learning

- · Automation of Data Extractions
- NLP and ML Studies
- · Clinical Data Mapping

8 CommonSpirit Health Research Institute Annual Report | 2023 Table of Contents 9 A boat doesn't go forward if each one is rowing their own way.

- Swahili Proverb





Research Operations

CommonSpirit Health Research Institute's Research Operations made significant strides in 2023, focusing on aligning and standardizing site research operations and staffing models on a national level. As part of this effort, the team has adopted standardized national job descriptions for entry-level RN and non-RN research coordinators.

To address the career ladder gap between senior clinical coordinators and CommonSpirit research operations management, the Research Operations team introduced a new position known as a Research Site Supervisor which will provide a clear progression path for talented individuals and bridge the gap in career advancement opportunities.

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Research Operations also implemented robust dashboards in 2023, providing real-time data and insights, and allowing the entire team to make informed decisions and optimize research operations.

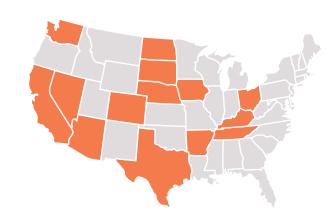
Research Operations at a Glance



63

FTEs Tota

- 1 System Director
- 8 Division Managers (3 in California)
- 54 Research
 Coordinators
 based across
 all divisions



54

Research Coordinators based across all divisions

Managing

408
Active
Clinical Trials

2,580
Active Study
Participants



Primary Research Operations Functions



Pre-Award Clinical Trial Feasibility and Clinical Trial Start Up Post Award Clinical Trial & Research Program Management

Ongoing Investigator and Site Staff Support Clinical Trial Quality, Study Enrollment, CTMS & Data Collection

The Research Operations team supports the growth and development of the Institute's backbone — its people.

Career ladders and professional advancement are a top organizational priority.

Research Analytics Center of Excellence

The goal of the CommonSpirit Health Research Institute RACE (Research Analytics Center of Excellence) is to establish and maintain a centralized infrastructure for the accumulation and analysis of high-quality clinical research data. This work is pivotal to the ongoing success of research teams throughout the ministry.

By utilizing interactive maps and a dashboard, the RACE team has created visualizations that showcase research activities across different divisions and locations.

In the first eight months of 2023, the RACE team supported 500+ hours of research study, involving various funded studies.

The RACE team leverages tools like REDCap and Patient Intelligence for thorough data collection and support. Data management and analysis are meticulously carried out to provide insightful findings. To simplify interpretation, we use platforms like Google Looker, Tableau, and Power BI for compelling data visualization, aiding in data-driven decisions making.



Looking to the future, RACE is set to a be a pioneer in research and data-led decisions, capitalizing on state-of-the-art tools for efficient data processes. With a focus on innovation and excellence, RACE will remain a key driver of research progression.

The RACE Team at a Glance



RACE Team

Full Time **Employees** 325

Total Scholarly Studies

12% increase from 2022 to 2023



Referral Traffic



Research Builds on PI Tool **REDCap Builds**

Completed

In progress (June 2023)

PCORI HSII Capacity Build Grant \$500K



Research Finance

CommonSpirit Health Research Institute's Finance team successfully secured funding for 33 new project/study budgets in FY23. The team also managed post award for 265 industry studies and 363 NCORP research studies. In addition to this work, they also managed all financial aspects (budgeting, CRO payments, site payments, cash reconciliation) of the Pivotal IDE trial, which is a physician-initiated study at Dignity Health Medical Foundation in California that also has nine non-CommonSpirit sites participating throughout the US.

33

Budgets

Completed
for New Trials



Budget
Amendments
Completed for
Existing Trials



\$138,150 Collected for Start-Up

Fees



\$1,506,265

Sponsor Payments Received Among the many improvements made to the financial processes for research activities in FY23:



Establishment of SignalPath Finance module



Patient stipend (Clincard) process enhancements



Bill process improvements



New accounting process for month-end revenue and expense reporting

Research Finance | CommonSpirit Health Research Institute



The Research Finance team collaborates extensively with other departments within CommonSpirit Health, as well as with other research entities around the country. The team's work with the Contracting Department led to a monthly meeting and a tracking document aimed at improving efficiency for the review of all contracts and budgets.

Office of Research Integrity and Compliance

The CommonSpirit Health Research Institute Office of Research integrity and Compliance oversees training and education, quality assurance, and IRB management for the enterprise.

In FY23, the team carried out a number of internal monitoring projects to ensure compliance and resolve issues. The number of open and pending Corrective and Preventive Action Plans (CAPAs) varied each month, with significant efforts made to close out pending cases.

In terms of site support, the number of calls and emails fluctuated throughout the year, with noticeable spikes in November and July. The first enrollments and enrollment reviews were completed for NCORP sites, contributing to the enhancement of clinical trial coordination.



The Training and Education team made remarkable strides, establishing the NCORP Hub and onboarding tracks for CRCs. The team also deployed webinars, aided in the transition to Google, and created an internal online presence for the Research Institute. The implementation of training standards and policies, along with instructional videos, contributed to staff development. Despite some pending updates, the team achieved substantial progress in training initiatives.



NCORP FOCUSED TRAINING FUNDAMENTALS PROGRAM

The NCORP Focused Training Fundamentals Program is a comprehensive 20-week training course designed to guide new coordinators through all the Clinical Trials Monitoring Branch auditable categories and provide them with in-depth education.

To date:

- 34 NCORP-rostered staff have completed the program which launched January 1, 2023
- 10 new staff joined the NCORP after the program's initial launch and have completed or are in the process of program completion



PROMOTING ETHICAL RESEARCH: THE ROLE AND ACHIEVEMENTS OF THE COMMONSPIRIT HEALTH RESEARCH INSTITUTE IRB

In the landscape of research involving human subjects, ethical considerations stand as an unwavering cornerstone. At the heart of ensuring these considerations is the Institutional Review Board (IRB) of the CommonSpirit Health Research Institute. With a steadfast commitment to safeguarding the rights, well-being, and dignity of participants, the IRB plays a pivotal role in upholding the highest standards of research ethics.

Read More

IRB

- Average turnaround time for all activities that didn't require full board review: 4.8 days
- New Full Board Submissions: 16
- Full Board Renewals: 34
- New Exempt Studies: 61
- New Ceded Studies: 37
- New Non-Human Subject Research Determinations: 79
- · New Expedited Studies: 64
- 683 active studies

Monitoring Letters in 2022 (systemwide)

- 73 industry monitoring letters
- 11 NCI Monitoring visit reports

Training and Education

- Onboarded: **30** new staff/investigators
- Total Office of Research Integrity and Quality webinars hosted: 2
- Total policies/procedures updated/created: 2
- Total projects completed: 5
- Total training hubs deployed: 2
- Total external training evaluations done: 2
- Total support for IRBNet: Average
 21 requests per month

Office of Sponsored Programs

The Office of Sponsored Programs (OSP), led by Julie Link, System Director, supports research across the enterprise. The team's mission is to empower researchers by securing external funding, driving innovation, and improving patient outcomes through administrative excellence.

During the pre-award process, the OSP meticulously assesses study feasibility, verifies physician investigator qualifications, and establishes valuable academic partnerships. This lays the foundation for successful research initiatives. In the post-award phase, the OSP continues its crucial role by implementing financial grant management, internal controls, tracking time and effort reporting, managing travel and procurement, and providing comprehensive reporting for project monitoring. The support of the OSP allows researchers and partners to continue making significant strides in advancing health care and driving innovation.

OFFICE OF SPONSORED PROGRAMS

Proposal/application submission support

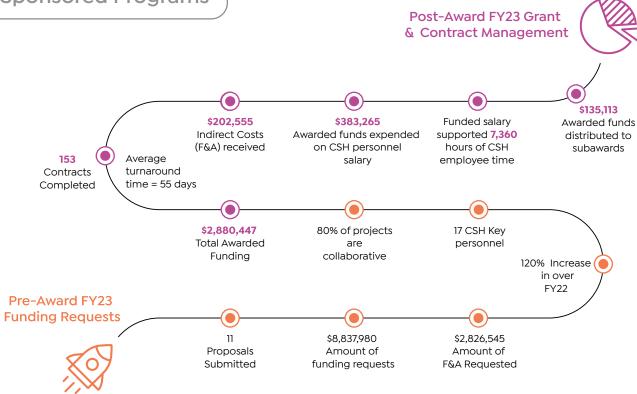
Review and approval of proposals

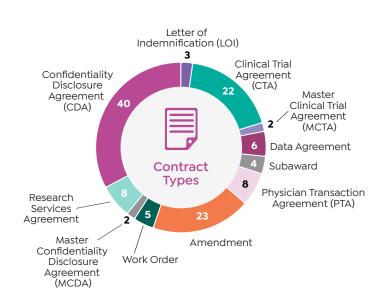
Grant and contract management

Program oversight



Sponsored Programs





During the pre-award process, the OSP meticulously assesses study feasibility, verifies physician investigator qualifications, and establishes valuable academic partnerships. This groundwork sets the stage for successful research initiatives.

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project monitoring.

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2023 CommonSpirit Research Summit

The 2023 CommonSpirit Research Summit, organized by the CommonSpirit Health Research Institute, brought together researchers, physicians, research staff, stakeholders, and academic collaborators in a dynamic and diverse educational environment. The summit provided a platform for transformative research discussions, knowledge sharing, and innovation fostering within the health care field.

The summit's agenda featured a wide range of sessions, including pre-summit workshops, general sessions, poster sessions, and networking receptions. Attendees had the opportunity to participate in engaging presentations and discussions led by esteemed speakers from prestigious institutions and health care organizations. These experts shared their insights on various topics, including health care inequities, patient stories, research future state vision, clinical panels on opportunities in research, and human trafficking research.

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Awards were presented to recognize outstanding contributions to research excellence and innovation within CommonSpirit.



Continuing Education Credits were available for health care professionals attending the summit, reinforcing the commitment to professional development and lifelong learning. The summit provided a valuable opportunity for attendees to expand their knowledge, network with peers, and engage in discussions that could shape the future of health care.































Research Award Honorees



HEALTH EQUITY RESEARCH AWARD

Ronald Chambers, MD, FAAFP, Program Director, Family Medicine Residency

"Dr. Chambers works to create trauma-informed, victim-centered longitudinal medical clinics for survivors of human trafficking coinciding with resident physician education."



RESEARCH PRACTICE INNOVATION AWARD

Lesly Kelly, PhD, RN, Nurse Scientist, Nursing Research

"Findings from Dr. Kelly's research have enhanced the way nurses are meaningfully recognized, changed the processes and response to secondary trauma in hospitals, and increased knowledge and awareness around compassion fatigue, burnout, and recognition in the interprofessional setting. In her position spanning both academic and clinical settings, she utilizes her research findings for evidence-based initiatives that results in practice changes."



ADMINISTRATIVE EXCELLENCE AWARD

Julie Link, MSW, LCSW, System Director, Sponsored Research Programs

"Julie is a true leader and runs a high-functioning team."



RESEARCH CHAMPION AWARD

Adriane Rubit, MBA, CCRP, System Manager Clinical Research Operations, Office of Research Clinical Operations

"Adriane deserves this award because in the face of adversity, she knows how to step up and pull her team together."



ADMINISTRATIVE EXCELLENCE AWARD

Rae Lynn Stafford, MBA, Specialist Data Research, Office of Research Integrity and Quality

"When you talk to Rae Lynn about research, she lights up and you can hear it in her voice."



RESEARCH COORDINATOR EXCELLENCE AWARD

Teri Thompson-Seim, Senior Clinical Research Coordinator

"Teri is thoughtful and kind. She has been a great advocate for research for our program."

Judy Mullen, RN, Research Coordinator, Kearney, Nebraska

"Judy had been a long time coordinator and support for our physicians, enrolling our patients on important National Cancer Institute through the CommonSpirit NCORP. When the oncology physicians joined another group outside CommonSpirit, Judy did not give up looking for research opportunities for her physicians and patients and has been enrolling in a rural population smoking cessation study since this time."



HUMANKINDNESS CHAMPION AWARD

Bradford Williams, BS, Program Coordinator

"Bradford is kind and inclusive and has a very collaborative approach. He always has a smile on his face and stays calm under pressure."

TEAM AWARD FOR EXCELLENCE IN RESEARCH TRIALS

Awarded to teams who go above and beyond to bring research to the organization and have a cross collaborative approach to move research forward for CommonSpirit Health.



- Population Health Management Team Helena Moon, MD, Julian A.
 Mitton, MD, MPH, Amanda Redmond, MBA, and Nicholas Stine, MD
- · Research Integrity Team, CommonSpirit Health Research Institute
- Nursing Research Team Baylor St Luke's Geraldine Jones, Jenny Li, Michael Guffey, Nishant Varghese, Christi Knapp, Marie Hodges, Baylor St. Luke's Medical Center
- The Cancer Clinical Research Unit (CCRU) Benaroya Research Institute
- · Diabetes Clinical Research Program, Benaroya Research Institute
- · The St. Joseph's Medical Center/BNI Biobank research team
- · DHARE (Dignity Health Arizona Research Enterprise)
- NCI Cancer Oncology Research Program (NCORP) Team: Terah Hardcastle, Mary Gulzow, Amber Warrick, Jessica Salamacha, Lauren Bacon
- Novavax Trial Team: Vikki Jenkins, Teri Thompson-Seim, Alejandra Cazarea,
 Danielle Hornbuckle, Lucy Ng-Price
- Ivy Brain Tumor Center Team: Kristin Hendrickson, Juliane White, Cassandra Valdez, Perla Velasquez, and Jillian Wasserman

A single arrow is easily broken, but not ten in a bundle.

- Proverb



Northern California

Bay Area

CommonSpirit Health Bay Area hospitals are proud to participate in academic, investigator initiated, national and international clinical research trials in oncology, cardiology, neurology and gender confirmation surgery, among other topics.





Research Sites

- Dignity Health Seguoia Hospital (Redwood City, California
- Dignity Health St. Mary's Medical Cente (San Francisco, California)
- Dignity Health Saint Francis Memorial Hospital (San Francisco, California)
- Dignity Health Dominican Hospital (Santa Cruz, California)
- Dignity Health Medical Foundation Medical Group (Santa Cruz, California)



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Areas of Research

Sequoia Hospital Heart and Vascular Institute: Helping to discover new preventive care and treatments, with the goal of finding new ways to provide timely and effective treatment to patients diagnosed with cardiovascular disease. Among the topics regularly included in trials are heart failure, heart arrhythmias, atrial fibrillation, pacemaker and implantable defibrillator technology.

The Cancer Center at St. Mary's Medical Center: Actively participates in numerous National Institutes of Health studies and is sought out by peer institutions to train others in new and innovative treatment and procedures. Among the cancers regularly included in trials are melanoma, lung,

bladder, colorectal, gastric and renal cell adenocarcinomas.

Dominican Hospital and Dignity Health

Medical Foundation: Actively participates in numerous National Institutes of Health studies and is sought out by peer institutions to train others in new and innovative treatment and procedures. Among the topics regularly included in trials are breast cancer, lung cancer and lymphoma.

RESEARCH TEAM

Division Manager Research Operations

25 Physician Principal Investigators

2 Senior Clinical Research Nurses

2 Senior Clinical Research Coordinators

Saint Francis Memorial Hospital Gender Institute: Established to deliver compassionate, high-quality, affordable health services to transgender patients and their families including health outcomes research to continually improve these services. Program is committed to delivering excellence in the overall care for patients of all gender identities.

Northern California

Greater Sacramento

CommonSpirit Health hospitals and clinics in Greater Sacramento participate in a variety of clinical research, focused on identifying new technology, procedures and treatment that will positively impact our patients, improving their symptoms, their prognosis and their quality of life.



PRE-FUSION PROTEIN SUBUNIT VACCINE EFFICACY NOVAVAX TRIAL | COVID-19

PREVENT-19 studied and evaluated the efficacy, safety and immunogenicity of NVXCoV2373 with Matrix-M™. The study was funded by Operation Warp Speed and the trial was initiated nationally in December 2020. This was a two-year study with planned completion for April. Total projected study enrollment was 29,582.

Dignity Health Woodland Clinic Medical Group,

with Dr. Rajan Merchant as Principal Investigator, was one of 100 sites in the U.S. to be selected and participate in the study. The Woodland target enrollment was 200 total with actual enrollment 210 in just six weeks.

The study led to the approval of the vaccine by the WHO and it is in the final stages of EUA in the U.S. The benefits of the Novavax vaccine include not requiring the special cold storage requirements that are associated with the m-RNA vaccines, making distribution and storage easier. This will allow for countless others to benefit and help to end the pandemic.

With the first dose administered in December 2020 and national enrollment completed in less than three months, CommonSpirit and Woodland Clinic played a key role in the Novavax vaccine being approved by the World Health Organization and being made available in 170 countries.



Research Sites

- and Elk Grove)



Areas of Research

Oncology Research: Participates in multi-center national and international clinical research trials, including a number of National Institutes of Health oncology studies. Clinical areas of research include breast, lung, prostate, gynecologic, and blood cancers.

Cardiology and Electrophysiology Research:

Among the advanced procedures offered through the Advanced Heart Disease Clinic are TAVR, TMVR, daVinci, LVAD, complex VT ablation, surgical and catheter treatments for atrial fibrillation, Watchman device placement, and placement of biventricular pacing/ICD devices. The Heart and Vascular Institute's Cardiac Electrophysiology research program has participated in many of the landmark electrophysiology trials over the last 20 years.

RESEARCH TEAM



Research Managers

Adriane Rubit, Division Manager **Research Operations**

Vikki Jenkins, Division Manager Research Operations

- 48 Investigators
- 4 Research RNs
- 2 Clinical Research Coordinators
- 2 Senior Clinical Research Coordinators
- 1 Research Engagement Coordinator

Neurology and Stroke Research:

Through participation in multi-center, national and international clinical trials,

CommonSpirit Health is helping to discover new preventive care and treatments for various neurological conditions, including stroke, aneurysm, multiple sclerosis, epilepsy and headache.

Infectious Disease Research: Woodland Clinic was a site and significant contributor to the landmark Novavax Covid vaccine trial, enrolling over 200 research subjects.

Southern California Division

The physicians and staff of the central and coastal regions of California are focused on identifying new technology, procedures and devices that will positively impact our patients, improving their symptoms, their prognosis and their quality of life. They proudly participate in academic, national and international clinical research trials including the CommonSpirit Health Research Institute NCORP.





Research Sites

- St. Joseph's Heart & Vascular Institute



Areas of Research

Pacific Central Coast Health Centers: Clinical trials include treatments for molecular targets, and solid tumors such as breast, colon, lung, bladder, melanoma, renal cell, head and neck cancers.

The team actively participates in university-affiliated network trials and National Institutes of Health trials and is often asked by pharmaceutical companies to participate in other research opportunities.

St. Joseph's Heart & Vascular Institute: Part of multiple multi-center, national and international clinical research trials. Through continued participation in these clinical trials, St. Joseph's is helping to discover new preventive care and treatments for heart failure, carotid vascular disease, and heart disease.

St. Joseph's Cancer Institute: Part of multiple multicenter, national and international clinical research trials, all with the goal of improving outcomes for patients diagnosed with various forms of cancer. Among the topics regularly included in trials are breast cancer, including high risk, BRCA positive, and metastatic.

Mercy Cancer Center: Providing a full range of cancer treatment and support services and proud to be a part of multiple multi-center, national and international clinical research trials. Among the topics regularly included in trials are breast, lung, prostate, and colorectal cancers.

CENTRAL COAST AND CENTRAL CALIFORNIA RESEARCH TEAM

Vikki Jenkins, Division Manager **Research Operations**

3 Primary Physician Investigators

2 Clinical Research Associates

1 Clinical Research Coordinator

Mary Rydman, Interim Division Mananger

St. Joseph's Heart & Vascular Institute

- 8 Cardiovascular Principal Investigators
- 7 Oncology Principal Investigators

1 Clinical Research Nurse

3 Clinical Research Nurse Associates

1 Clinical Research Associate Mercy UC Davis Cancer Center

- 2 Oncology Principal Investigators
- 1 Senior Clinical Research Nurse

Midwest Division

Nebraska and Southwest Iowa

CHI Health has served the Nebraska and Southwest Iowa area for more than 135 years, enjoying a long history of research collaboration with Creighton University.





Research Sites



Areas of Research

- Cardiology (TAVR and Atrial Fibrillation)
- Oncology (NCORP, Metastatic endometrial ovarian fallopian carcinoma)
- Gastroenterology (NASH)
- Pulmonology (Asthma, COVID-19, Pulmonary Nodules)
- Trauma
- · Behavioral Health (Suicidal, Schizophrenia, and Depression)
- Nephrology
- Women's Health (3D In Utero)

Trial Highlight

In the Champion AF trial, the Nebraska/Iowa site was the third highest enroller internationally with 107 patients.

RESEARCH TEAM



Molly Davis, Research Manager

Mel Romsa, Research Coordinator/ Regulatory

Barb Lapke, Research Coordinator/ Finance

Lois Rasmussen. Research Coordinator

Jodi Salvatori, Research Coordinator

Daisy Ochoa-Rojas, Research Coordinator

Maddie Esch, Research Coordinator

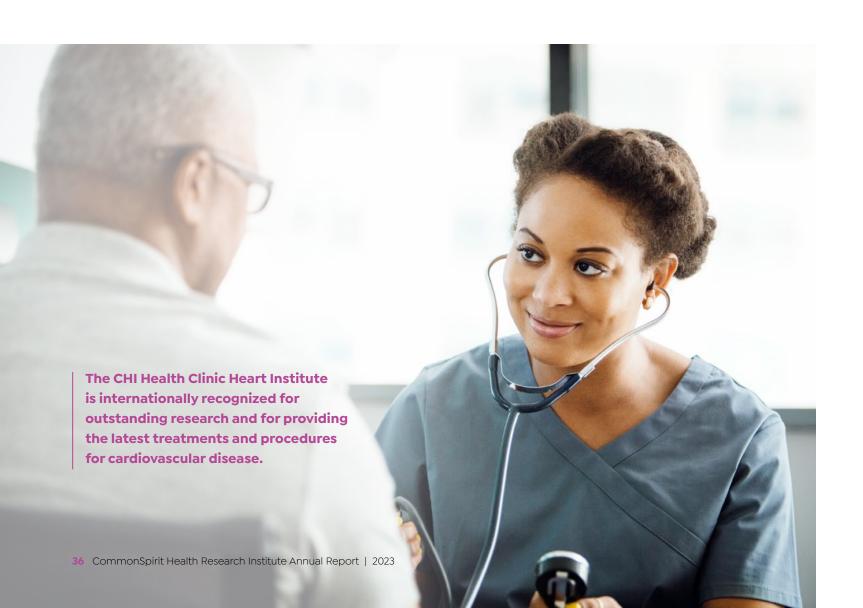
Lindsay Zortman, Behavioral Health Research Coordinator

Joel Narveson, Trauma Research Coordinator

Midwest Division

CHI Health Clinic Heart Institute

CHI Health Clinic Heart Institute is one of the nation's highest-quality, award-winning heart programs, providing advanced cardiology care to Lincoln and the more than 35 outreach locations across the Nebraska, southwest Iowa and northern Kansas region for more than 25 years.





Research Sites

- CHI Health Clinic Heart Institute Lincoln and Grand Island
- CHI Health Nebraska Heart Hospita





Research Programs

DAPA ACT HF-TIMI 68

Evaluating the effect of in-hospital initiation of dapagliflozin versus placebo on the clinical outcome of cardiovascular death or worsening heart failure in patients with heart failure with reduced ejection fraction.

INTERRUPT-AF

To obtain data for the Rhythmia™ Mapping System in conjunction with Boston Scientific Open-Irrigated (OI) Catheters for ablation of Paroxysmal Atrial Fibrillation (PAF).

FINEARTS-HF

Evaluating the efficacy and safety of Finerenone on morbidity and mortality in participants with heart failure and left ventricular ejection fraction Greater or equal to 40%.

V-INITIATE

Evaluating the effect of an inclisiran first implementation strategy compared to usual care in patients with atherosclerotic cardiovascular disease and elevated LDL-C despite receiving maximally tolerated statin therapy.

RESEARCH TEAM

9 Physician Investigators

Randy Holcomb, MSE, Manager Research Center

Deb Baehr. LPN. Research Coordinator

Melissa Kelley, RN, Research Nurse (Grand Island/Hastings)

Michael Miriovsky, MBA, Research Coordinator

Julie Potter, Research Coordinator

Laura Eisele, RN, Research Nurse

ZEUS

Studying how Ziltivekimab works compared to placebo in people with cardiovascular disease, chronic kidney disease and inflammation.

Oceanic-AF

Phase 3 study to investigate the efficacy and safety of the oral factor XIa (FXIa) inhibitor asundexian (BAY 2433334) compared with apixaban in participants with atrial fibrillation at risk for stroke.

Pacific Northwest Division

Our Pacific Northwest research teams offer research opportunity to the community of South Puget Sound in both Tacoma and Silverdale through two of our largest facilities, St. Joseph's Medical Center and St. Michael Medical Center.





Research Sites



Areas of Research

St. Michael Medical Center's current focus is oncology research. It is among the best cancer programs in the country, accredited by the American College of Surgeons Commissions on Cancer. Currently St. Michael is engaged in oncology trials through CommonSpirit Health's NCORP program with an intent to engage in industry-sponsored oncology trials in FY24.

St. Joseph's Medical Center focuses on cardiovascular indications including heart failure, atrial fibrillation and arrhythmias. St. Joseph's is gaining a reputation for being among the highest enrolling sites.

Our providers and research nurses are dedicated to serving the community and having a meaningful impact by delivering cutting edge research to our oncology patients.

RESEARCH TEAM

Dalia Sherif, Division Manager, Clinical Research 4 RN Clinical **Research Coordinators**

populations of cardiovascular and

Southeast Division

Arkansas

The Arkansas Neurosciences Institute, led by Dr. Ali Krisht, internationally known neurosurgeon, is a comprehensive program incorporating all aspects of neurosurgery and the spectrum of neurological disorders: skull-base surgery, vascular neurosurgery, neuro-oncology, spine and spinal cord surgery epilepsy surgery, and surgery for movement disorders.





Research Sites



Areas of Research

CHI St. Vincent Heart Institute: Dr. Thomas Rayburn III, MD, and Clinical Research Coordinator Lynn Bass, RN, have received awards for their contributions to the PROACT Xa clinical trial and high-priority heart care research. CHI St. Vincent was the first participating research partner to enroll a patient in the randomized, clinical trial thath is part of a Linked Clinical Research Centers seven-year initiative through the Cardiothoracic Surgical Trials Network (CTSN), part of the National Institutes of Health's National Heart, Lung and Blood Institute (NHLBI).

Arkansas Neurosciences Institute: The creation of the Neuroscience campus in central Arkansas involved the renovation of CHI St. Vincent North and the design and construction of the research and education facility. It is the culmination of a \$30-million project, including over \$4 million in philanthropic investments.

Our Heart Institute research is committed to delivering the most advanced care to our communities across Arkansas which suffer from a high prevalence of cardiac disease, stroke, obesity and diabetes.

RESEARCH TEAM

Ginger Whisman, Research Operations Manager Supporting Arkansas

St. Vincent Heart Institute

5 Physician Investigators

2 RN Research Coordinators

Arkansas Neurosciences Institute **Education and Research Center**

Arkansas research manager support provided by Ginger Whisman, Tennessee Research Operations Manager

Southeast Division

Kentucky

CommonSpirit Health's Kentucky research programs are led by 13 dedicated physicians, with the support of four RN and two non-RN professional clinical research coordinators.





Research Sites

- CHI Saint Joseph Health (East Lexington)
- CHI Saint Joseph Health (Main, Lexington)
- CHI Saint Joseph Health (Flaget Memorial Hospital)
- CHI Saint Joseph Health (London/Cancer Center
- CHI Saint Joseph Health (Corbin/Cancer Center
- CHI Saint Joseph Health (Mount Sterling



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Areas of Research

Oncology Research: Member of
CommonSpirit Health Research Institute
with 10 active NCORP studies currently.
There is currently one large pharmaceutical
multionomics blood draw study in which the
four Kentucky sites have enrolled 128 subjects.

Cardiology Research: Currently there are six cardiology studies with more than 40 research patients enrolled.

Neurology Research: There are three current neurology studies with 20 patients enrolled.

Kentucky is uniquely challenged because 40.6% of our population live in non-metro areas.

RESEARCH TEAMS



Jennifer Kohlman, Kentucky Research Site Supervisor

3 RN Clinical Research Coordinators

2 Non RN Research Coordinators

Southeast Division

Tennessee

The CHI Memorial Research Center team is committed to providing quality health care for our patients and community. The team provides research support for all CommonSpirit Health facilities in Tennessee and Georgia. Current areas of research include, but are not limited to, cardiology, neurology, nephrology, and pulmonology.

RESEARCH TEAMS

Thomas Devlin, MD, Neurology

Krishnendu Bhadra, MD, Pulmonary

Ruchir Shaw, MD, Neurology

Ginger Whisman. Division Manager, Research Operations

Penny Andrews. RN. Sr. Research Coordinator

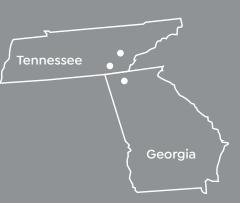
Jennifer Poole. Research Coordinator





Research Sites

- CHI Memorial Hospital-Glenwood Campus (Chattanooga)
- CHI Memorial Stroke and Neuroscience Center



Areas of Research

- RheSOLVE: A Clinical Evaluation of the RheOx Bronchial Rheoplasty System for the Treatment of the Symptoms of Chronic Bronchitis in Adult Patients with COPD
- Cone Beam CT Guided **Bronchoscopic Biopsy of** Peripheral Lung Lesions Using a **Dedicated Anesthesia Protocol**
- SURAMIN AKI-A Prospective. Double-Blind, Placebo-controlled Study of Suramin in Subjects with Furosemide-Resistant Acute Kidney Injury (AKI): Efficacy in Preventing Dialysis Dependent AKI
- The EDEN Project: A Prospective. Multicenter, Observational Study to Assess Organ Failure Patterns in Endotoxemic Septic Shock
- LUNGVISION: Bronchoscopic Lung Biopsy enhancement with LungVision® device
- · AEGIS II-A Phase 3, Multicenter, Double-blind, Randomized, Placebo-controlled, Parallel-group **Study:** Investigate the Efficacy and Safety of CSL112 in Subjects with Acute Coronary Syndrome

- LT3001-203-A Phase II, Two-Part, Double-Blind, Randomized, Placebo-Controlled Study: Evaluate the Safety and Efficacy of LT3001 Drug Product in Subjects with Acute Ischemic Stroke (AIS) Undergoing Endovascular
- · LT3001-205-A Phase II, Double-Blind, Randomized, Placebo-Controlled Study: Evaluate the Safety and Efficacy of Multiple Doses of LT3001 Drug Product in Subjects with Acute Ischemic Stroke (AIS)

Thrombectomy (EVT)

- MASTERS II-MultiStem® **Administration for Stroke Treatment and Enhanced Recovery Study**
- DIAGNOS-Retinal Microcirculation **Anoamalies and Risk Prediction** of Stroke Incident
- VOICE-ValidatiOn of Velocity **CurvaturE Index as a Diagnostic** Biomarker Tool for Assessment of Large Vessel Stroke

Texas Division

Historically, clinical research in the CommonSpirit Health Texas division has focused on <u>Baylor College of Medicine</u> and their internationally recognized research programs and infrastructure based at Baylor St. Luke's Medical Center in Houston. Outside of Baylor St. Luke's, CommonSpirit and the CommonSpirit Research Institute had little infrastructure and support for research endeavors outside of BCM-managed protocols. To build a new research foundation for the Texas division, the Institute established a Texas Division Research Manager position based in Houston that will support all research endeavors in the division not managed by BCM.

In addition, the Institute partnered with Texas Division executive leadership to create the Texas Division Research Council (TDRC). The TDRC was established to pre-review all Texas division research outside of what is managed by Baylor College of Medicine. This process is designed to allow Texas division leadership to decide which protocols best meet their mission, cover costs and otherwise are endeavors they wish to support.

COMMITTEE MEMBERS

Adol Esquivel, Mary Rydman, Vani Nilakantan, Bradley Lembcke, Darren G. Woodside, Joseph G. Rogers, Shante Rodney, Huma Javaid, Toni Castillo, Charlene Smith, John Flynn, Paul Arrington, Kelley Vicknair, J. Michael Gomez, Vernell Johnson III, Wendi Peterson, Angela Coscio, Ashok Balasubramanyam, Carolyn Quan, Janet Allen, Yong Choi As a fervent advocate for research, I see researchers as modernday archaeologists, delving deep to unearth concealed truths to help better lives. In this inexhaustible quest for understanding, I firmly believe there is always more to discover.

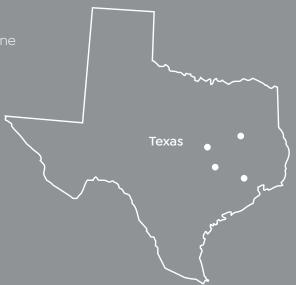
- Huma Javaid, MS, CCRP Texas Division Research Manager





Research Sites

- CHI St. Luke's Health Baylor College of Medicine Medical Center
- Baylor College of Medicine
- University of Texas Health Center at the Texas Heart Institute Clinic
- Texas Heart Institute
- St. Luke's Hospital at The Vintage (Houston)
- St. Luke's Sugar Land Hospital (Sugar Land)
- St. Luke's Patients Medical Center (Pasadena)
- St. Joseph Regional Health Center (Bryar
- · Toyas ASM Hoalth



Never doubt that a small group of thoughtful citizens can change the world. Indeed, it is the only thing that ever has.

- Margaret Mead



Clinical Service Lines

Cardiovascular Research

The CommonSpirit Health Research Institute Cardiovascular team achieved significant milestones in advancing cardiovascular research in 2023.

CommonSpirit Health's Cardiovascular Service Line is focused on transformative clinical trials by capitalizing on existing data assets, such as the STS/ACC TVT Registry™ for real world evidence and programmatic research. By harnessing Signal Path, Patient Intelligence and REDCap tools, our research leads have the ability to make more informed decisions and accelerate progress toward meeting our collective goal of transforming care.

.

The team partnered with external organizations and researchers to facilitate a collaborative exchange of knowledge, pool resources and address questions collectively. These collaborations have expanded research horizons and propelled efforts toward groundbreaking discoveries in the field of cardiovascular health.

Service Line Leaders



Nezar Falluji, MD, MPH, MBA, FACC, FSCAI System Physician Vice President Cardiovascular Service Line

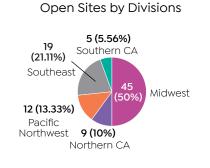


Mary Osborne, MBA, MSN, RN System Vice President Administration, Cardiovascular Service Line

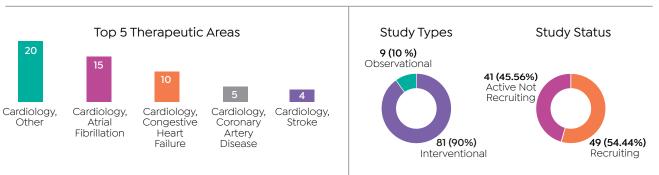
Study Therapeutic Details











Clinical Service Lines

Neurology Research

Through its national Neurology Collaborative, CommonSpirit Health Research Institute is working to grow its national neuroscience research network.



Thomas Devlin, MD, Leader of Neurology Collaborative

Currently this network consists of seven sites across four states actively enrolling in industry- and other grant-funded trials with nearly 80 total enrolled patients. This national endeavor is supported by ten Principal Investigators and eight FTEs across all sites.



CHI Memorial Leads National Research Study Creating a New Standard of Care for Stroke Patients

CHI Memorial's Stroke and Neuroscience Center participated in the national research study, BUBL, and was instrumental in developing novel technology that can better detect a specific cause of brain damage in some stroke victims. Insights gleaned from this landmark study have finally unraveled the mystery of why the cause of stroke has been so elusive for so many stroke patients, particularly young patients.

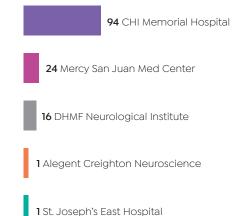
The technology used in the study is robotic transcranial Doppler (TCD) ultrasound from NovaSignal. Results of the study show TCD ultrasound is three times as good as conventional cardiac testing at identifying cardiac abnormalities capable of producing blood clots that cause stroke.

"Understanding the underlying cause of a stroke is of utmost importance, allowing us to deliver far more effective therapy to prevent another stroke," said Thomas Devlin, MD, PhD, FSVIN, neurologist, medical director of CHI Memorial Stroke and Neuroscience Center, and co-director of CommonSpirit's national neuroscience collaborative. "After seeing the positive impact delivered by TCD ultrasound in our practice, it became clear to both our brain and heart doctors that it must be incorporated into our practice as a new standard of care."

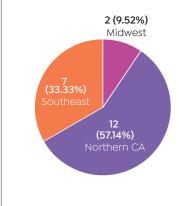
We are now heavily engaged in training physicians across CommonSpirit Health on this new standard of medical care and anticipate that countless lives will be saved by preventing their future stroke.

- Ruchir Shah, MD, CHI Memorial Stroke Program **Medical Director**

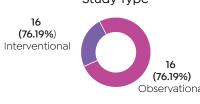




Open Sites By Divisions

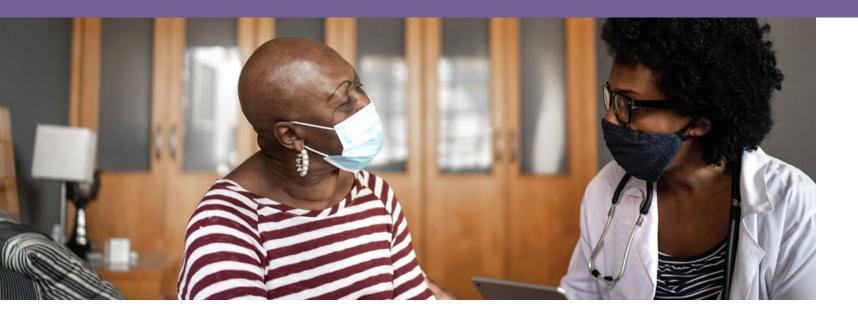


Study Type



Study Status





Clinical Service Lines

Oncology Research

CommonSpirit Health Research Institute plays a key role nationally in conducting oncology research within our national network of community hospitals and clinics.

The CommonSpirit Research Institute Oncology research network includes 29 sites across seven states that are actively enrolling in National Cancer Institute, industry- and other grantfunded trials, with nearly 1300 total patients enrolled.

This national endeavor is supported by 30 Principal Investigators and 33 FTEs across all sites. These trials are interventional, observational and patient registries.

ONCOLOGY RESEARCH COUNCIL

Council Co-Chairs

- · Dr. P. Emanuel
- · Dr. S. Siddique

Dr. Eric Bernicker

Dr. Jeffrey Albert

.

Dr. J. Croley (SE)

Dr. Bruce Lin (PNW)

Dr. Ben Musher (TX)

Dr. Aidnag Diaz (SW)

Dr. Parminder Sidhu (So. Cal)

Dr. Peter Silberstein (Midwest)

Jill Tapper, Director, Precision Medicine

Diana Pak (PNW)

Service Line Leaders

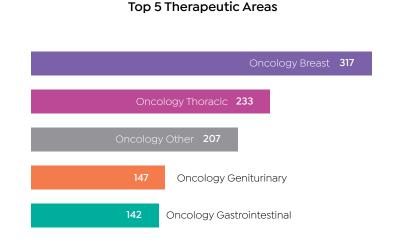


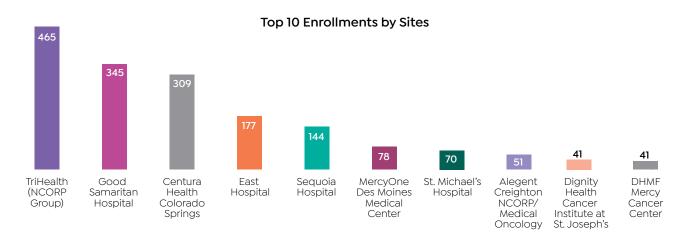
Peter Emmanuel, MD System Vice President, National Oncology Service Line



Marcia Gruber-Page System VP Oncology, Oncology Clinical Institute

Open Sites by Divisions 92 (5.63%) Texas (10.28%) Southwest (10.28%) Southeast 263 (16.09%) Southeast 104 (6.36%) Pacific Northwest 124 (7.58%) Northern California





TRIAL SPOTLIGHT: FREENOME VALLANIA TRIAL

The Vallania Study: A Case Control Study for the Development of Multiomics Blood Tests for Cancer Screening

This protocol is a case-control, multi-center, diagnostic study to collect blood samples to support the development of blood-based screening tests for multiple cancers. The primary objective is to compare blood samples from cancer case subjects and non-cancer control subjects in order to develop and characterize blood-based multiomics tests in specific cancer types or as a combination of multiple cancers. Seven CommonSpirit sites in Kentucky and California are enrolling now, with our Kentucky sites noted by Freenome as top enrolling sites nationally. The Vallania study was CommonSpirit's first multi-site industry funded protocol brought to CommonSpirit directly by the sponsor (Freenome) and opened at multiple CommonSpirit sites with a single IRB, contract, budget, and operational review.

PRINCIPAL INVESTIGATORS:

Dr. Michael Alexander, Dr. Parminder Sidhu, Dr. Jessica Croley, Dr. Monte Martin, Dr. Muhammad Niazi, Dr. Robert Weber

54 CommonSpirit Health Research Institute Annual Report | 2023

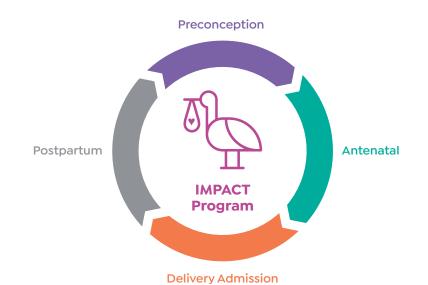
Table of Contents 55



Integrated Management for Pregnancy and Cardiovascular Treatment (IMPACT) Program

The IMPACT Program will provide collaborative, coordinated care for Black women and American Indian women with pre-existing cardiovascular conditions and/or at high-risk for hypertensive and cardiovascular disease of pregnancy.

The cardio-obstetric team will provide coordinated care with obstetricians, maternal fetal medicine, and primary care clinicians through the use of the Cardio-Obstetrics Nurse Navigator. Participants have multiple opportunities to access the program throughout the care continuum (preconception, antenatal, delivery admission, and up to one year postpartum).



PRINCIPAL INVESTIGATOR:

Rachel M. Bond MD, FACC, System Director, Women's Heart Health, Dignity Health, Arizona

Clinical Service Lines

Women and Infants Research

Among the CommonSpirit Health ministry, Women and Infants teams are conducting clinical research to further the understanding of the unique health needs of this population.

Service Line Leaders



Larry Shields, MD System Physician Vice President, Women and Infants Clinical Institute



Mindy Foster, MSN, RN System Vice President, Women and Infants Clinical Institute

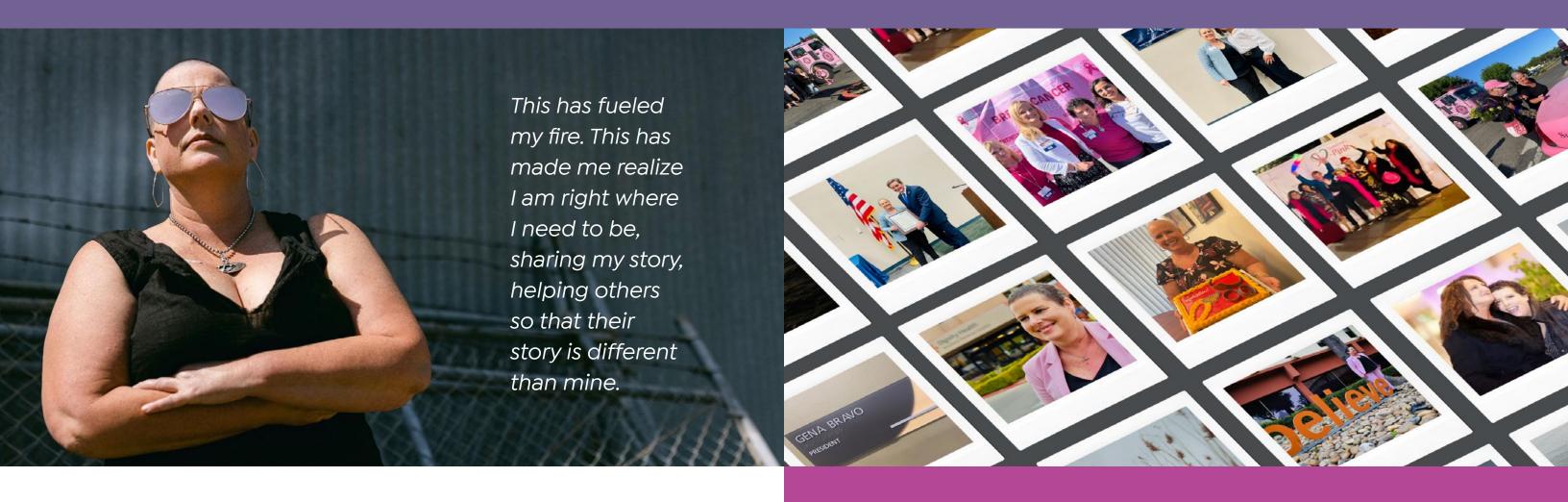
WOMEN AND INFANTS CLINICAL INSTITUTE: POSTPARTUM WELLNESS AND RECOVERY (PWR) PROGRAM

The Postpartum Wellness and Recovery (PWR)
Program aims to provide new mothers and
birthing persons with access to specialized,
preventive, and high-quality care in the critical
first year after birth. Expanding postpartum care
to one year is critical to mitigate immediate
and lifelong health risks and promote
preventive health behaviors. Specifically, studies
overwhelmingly identify hypertensive disorders
of pregnancy, gestational diabetes mellitus and
perinatal mood and anxiety disorders as three
major areas of perinatal morbidity that have
been shown to be correlated risks during the
perinatal period.

The overarching project goal is to reduce health disparities, promote health equity, and improve women's long-term health outcomes. PWR not only supports women during the postpartum period when they are at highest risk, but also

serves as a strategy for preventing severe maternal morbidity and mortality and establishes a foundation for long-term health.

This innovation was based on an informal referral process and partnership between Leizl Sapico, MD, Obstetrician/Gynecologist, and Heidi Nicewarner, MD, Cardiologist at Virgina Mason, Seattle. CommonSpirit Health Women and Infants Clinical Institute recognized an opportunity to assist in the development of this innovative work with a view to pilot and scale the program throughout the system, providing subject matter expertise in program development, including focused data collection, strategic goal setting, and financial support acquisition. The pilot program was initiated in October 2022 at Virginia Mason Medical Center. Grant funding was secured in 2023 to fund a Perinatal Nurse Navigator and expand PWR to include two additional sites in Washington.



Lifelong Caregiver Faces Life-Changing Diagnosis

Patient Story

Gena's journey in health care began when she was just a child – caring for her single father, a Vietnam veteran who suffered a life-altering traumatic brain injury when his helicopter crashed. After years of helping him navigate a complex web of care for his mental and physical health, Gena eventually realized she was called to care for others. She became a nurse.

Gena Bravo describes herself as "a mom, a daughter, a sister, a wife, a nurse, a hospital president… and a cancer survivor." Her entire career has been at what are now
CommonSpirit Health hospitals, including many
years spent in the Emergency Department at Mercy
General Hospital (Sacramento, California), before
accepting the call to move into hospital leadership at
Woodland Memorial Hospital (Woodland, California)
first as the Chief Nurse Executive and eventually as
Hospital President, a role she holds today.

A lifetime of caring for others took a detour in April 2021, however, when Gena noticed swelling in her shoulder and chest and found a lump in her breast. She would eventually be diagnosed with stage 3 breast cancer that had metastasized to two sets of lymph nodes and included four tumors measuring 7 centimeters.

"It had been almost 3 years since I had had a mammogram," Gena says. "The truth is, as nurses, a caretaker, I never learned to put myself first. I had recently moved to a new county, took on an executive role at a new hospital, and led a team through a pandemic. All excuses. As a nurse, I know better. I thought I was immune. I found out no one is immune."

Facing a cancer diagnosis while leading a hospital through a worldwide pandemic would be the most challenging experience of Gena's personal and professional life. But buoyed by the strength of her colleagues and her care team, she did not waver.

"I had the choice to let breast cancer define my day to day or to control my story and let life prevail instead," Gena says. "Sure I had to slow down here and there but overall — I kept on going. That is who I am and I wasn't going to let anything take that from me. I made it to huddles and rounds, I helped to vaccinate our staff, and took to the streets to ensure those most in need also had access. I was recognized at Congressman John Garamendi's Women of the Year event for my public service work. I had chemo, surgery, then radiation and then got right back to my desk and the hospital halls that rang for me for what I know to be a higher calling."

Today Gena is healthy and filled with appreciation for the countless years of clinical research that made her cancer treatments possible, ensuring she would earn the label of "survivor."

"I don't know where my next chapters will take me. I do know I have a lot of life left to live. A life full of gratitude. Gratitude for the research, the knowledge, the testing, the treatments, the care, the kindness that has allowed me to be here today — cancer free. If there is anyone in health care that has lost your WHY, look at any one of those faces, that is your why, that is why you do what you do."

Table of Contents 59

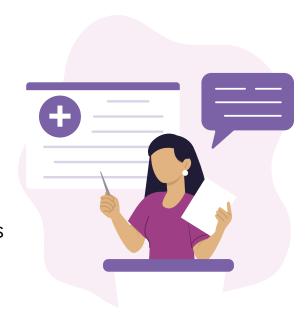
Coming together is a beginning. Keeping together is progress. Working together is success.

 Henry Ford, American industrialist and business magnate (1863-1947)



Nursing

The CommonSpirit Health Nursing
Research and Evidence-Based
Practice Council has representatives
in each division to support activities
to advance research and evidencebased practice, such as educational
offerings, resources, and applying for
grant opportunities. This year members
of the council were able to attend the
CommonSpirit Research Summit and
present posters and a keynote address
on transforming nursing research.



NURSING RESEARCH AND EVIDENCE-BASED PRACTICE COUNCIL LEADERSHIP

La Donna Christy, PhD, RN, NEA-BC, NPD-BC, CCRN-K, CHSE, System Director, Clinical Education Technology Integration Learning & Organization Development

Jodeena Kempnich, MSN, RN, CNML, Clinical Practice Coordinator

Lesly Kelly, PhD, RN, FAAN, Nurse Scientist

Non-Ventilated Prone Positioning in the COVID-19 Population | Baylor St. Luke's Medical Center (Houston, Texas)

A team of nurses investigated the efficacy of proning non-ventilated, hospitalized COVID-19 hypoxemic patients. The study was disseminated at the March Nursing Excellence Showcase and garnered a Research Team award from the Research Institute.

Marie Hodges BSN, RN-BC
Nishant Varghese BSC, BSN, RN
Michael Guffey BSN, RN, CCRN
Christi Knapp BSN, RN-BC
Jenny Li BSN, RN, OCN
Geraldine Jones PhD, RN-BC
Danielle Guffey

Hospital-Acquired Pressure Injuries in Adults with Prone Positioning Using Manual Method Versus Specialty Bed: A Retrospective Comparison Cohort Study | Dignity Health St. Joseph's Hospital (Stockton, California)

An interdisciplinary team led by nurses compared the incidence of hospital-acquired pressure injuries in patients with acute respiratory distress syndrome and placed in a prone position. This research was published in the May 2023 issue of the *Journal of Wound, Ostomy, and Continence Nursing*.

Jacqueline M. DeMellow, PhD, RN, CCNS, CPHQ Harbir Dhillon, MD Mouchumi Bhattacharyya, PhD Daniel Pacitto, DO Teri M. Kozik, PhD, CNS, CCRN-K

Research Informed Vascular Access Policy Bundle Development and Implementation Across a Large Non-Profit Health Care Organization

CommonSpirit Health's Vascular Access Collaborative Group completed four system vascular access policies for the purposes of incorporating evidence-based

Lauren Bulin, MSN, MBA, RN

Alison Rich Mason, MS, RN

practice, reducing clinical variation, and improving patient vascular access outcomes. Policy content included: appropriate vascular access selection, peripheral intravenous vascular catheter (PIVC) insertion, maintenance, and removal, vascular access device (VAD) insertion, maintenance, and removal, and extravasation prevention and management. In addition, the electronic health record (EHR) vascular access documentation was reviewed and improved to align with policy content.

Validation of PEARR Tool in Supporting Care of Trafficking Victims

In 2018, Dignity Health was awarded a \$948,921 grant from the U.S. Department of Justice to expand on our Human Trafficking Response Program. As part of these efforts,

Holly Austin Gibbs, System Director,
Human Trafficking Response Program

the Arizona State University Office of Sex Trafficking Intervention Research (STIR), with whom we contracted as the outside evaluator, surveyed Dignity Health staff in three Bakersfield, California, hospitals about the effectiveness, availability, and ease of use of the PEARR Tool in 2020 and again in 2021.

The PEARR (Privacy, Educate, Ask, Respect, and Respond) tool is used to guide health professionals on how to provide trauma-informed assistance to patients who may be experiencing abuse, neglect, or violence.

Of those that had utilized the PEARR Tool, there was a marked increase in hospital staff that reported its usefulness and ease of access. Of the respondents who did not utilize the PEARR Tool, most reported that the reason was because they had not suspected any patients to be victims.

Pharmacy Enterprise

The CommonSpirit Pharmacy Enterprise is dedicated to improving medication-related patient outcomes, providing high-quality, safe, and cost-effective medication management. Over the past year, the national pharmacy team undertook several research and data development projects to enhance patient care and financial improvements. Our team members took on leadership roles in these projects, collaborating with internal and external partners to improve medication-related outcomes.









Research Highlights



Completed an IRB-approved real-world data study:

Our team completed a study of Remdesivir in COVID-19 patients measuring length of stay and clinical outcomes. The study demonstrated that Remdesivir patients were more likely to have a longer length of hospitalization without any difference in clinical improvement.



Analyzed medication expense patterns:

Our team created dashboards to drive change toward more pharmacoeconomic biosimilar medications and to drive clinical initiatives to help exceed FY23 value capture goals. Fiscal year to date, the Pharmacy Enterprise has realized more than \$100 million in savings.



Collaborated to develop pharmacy-led separately reimbursable infusion analytics:

Our team, in collaboration with payor strategy, is in the second phase of creating a mechanism to monitor separately reimbursable medications' cost, margin and reimbursement opportunities. The ultimate goal is to improve the reimbursement processes to ensure correct payments for the medications administered so we can continue to provide excellent care.



Developing a drug shortage monitoring system:

In collaboration with the application development team, a bot is being developed to provide early detection of potential drug shortages. This will provide a mechanism to be proactive in ensuring we can provide the best care possible.

CommonSpirit Health Physician Enterprise

The CommonSpirit Health
Physician Enterprise represents
6,000 clinicians across 24 states.
Physician Enterprise medical groups,
physician networks, and population
health work are at the core of
CommonSpirit's efforts to expand
access to primary and preventative
care, and advocate for those who
are poor and vulnerable.

This work is vital to the transition to a value-based and coordinated care approach that builds healthier communities and keeps health care affordable. The Physician Enterprise teams have established clinical standards and best practices while also leveraging the latest medical advances in technology and treatments.

As a learning health system and as part of our pursuit of excellence in patient care, our partnership with the CommonSpirit Health Research Institute is critical in our work to develop new ways to improve the health and well-being of the communities we serve. Together, we are fully engaged in implementation science so we can offer the best possible evidence-based care to the communities we serve.

– Dr. Thomas McGinn, Executive Vice President, CommonSpirit Health Physician Enterprise

Physician Enterprise Vision Awards in Academic Excellence

This year the Physician Enterprise awarded the 2023 CommonSpirit Health Physician Enterprise Vision Awards, intended to both honor and recognize the extraordinary work and clinical excellence of colleagues across the Physician Enterprise. These awards are anchored in this Vision Statement: A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

ACADEMIC EXCELLENCE: MEDICAL HUMANITIES

Infectious diseases management in wound care settings: common causative organisms and frequently prescribed antibiotics

Baylor College of Medicine, Lead Author: Yuriko Fukuta, MD, PhD, Assistant Professor

ACADEMIC EXCELLENCE: PRACTICE INNOVATION/HIGH VALUE CARE

A new dawn in internal medicine education curriculum: a project by the residents, with the residents, for the residents

Creighton School of Medicine, Corresponding Author: Mohsin Mirza, MBBS, Assistant Professor

ACADEMIC EXCELLENCE: PRACTICE INNOVATION/HIGH VALUE CARE

Clinical spotlight intervention to accelerate translation of evidence-based practices in primary care

Virginia Mason Franciscan Health, Lead Author: Kavita Chawla, MD, FACP, MHA, Clinical Standards and Variation Reduction Steering Committee



ACADEMIC EXCELLENCE: HEALTH DISPARITIES RESEARCH

A health system's approach to using CBPR principles with multisector collaboration to design and implement a COVID-19 vaccine outreach program

Physician Enterprise, Lead Author: Brisa Urquieta de Hernandez, PhD, System Director, Health and Humankindness Operations

ACADEMIC EXCELLENCE: CLINICAL RESEARCH

Lifestyle intervention strategy to treat diabetes in older adults: A randomized controlled trial

Baylor College of Medicine, Corresponding Author: Dennis T. Villareal, MD, Professor

ACADEMIC EXCELLENCE: CLINICAL RESEARCH

Homologous and heterologous COVID-19 booster vaccinations

Baylor College of Medicine, Lead Author: Robert Atmar, MD, Professor

Precision Medicine

Precision medicine is a data-driven approach to disease prevention, diagnosis and treatment that accounts for the individual differences in a patient's genes, lifestyle and environment.

Precision Medicine and the Precision Medicine Alliance (PMA) at CommonSpirit Health exist to support and create opportunities to drive high-impact, high-value precision medicine strategies across CommonSpirit.

.

Establishing alliances through internal and external partnerships and collaborations is key to advancing precision medicine-based approaches that:



Deliver clinically effective and efficient care to all patients, yielding the best possible outcomes.



Ensure the specific health needs of our patients, patient families and communities are identified, understood and addressed.



Generate ongoing opportunities for translational research, innovation and discovery.



PRECISION MEDICINE ALLIANCE GOVERNANCE

Directo

Jill Tapper

Executive Advisory Board
Manoja Lecamwasam (Chair),
System VP, Intellectual Property and
Life Sciences Innovation, Strategic

Gary Greensweig, DO, System SVP/ Chief Physician Executive, Physician Enterprise

Amanda Trask, System SVP Clinical Institutes and Service Lines

National-scale Precision Medicine Research

CommonSpirit Health is a member of the Personalized Medicine Coalition (PMC), an alliance representing a broad spectrum of academic, industrial, patient and health care provider constituencies dedicated to promoting the understanding and adoption of personalized medicine concepts, services, and products to benefit patients and health systems. The PMC maintains a robust research agenda to support continued progress towards this goal. This year, the Precision Medicine Alliance is participating in two projects as part of this agenda:

- Improvements in Clinical Care Associated with Personalized Medicine: This project will examine the effect of integrating personalized medicine approaches in driving improved clinical care and systemic efficiency
- Addressing Disparities in Research Informing
 Personalized Medicine: This project brings together
 key stakeholders that are working with or are
 part of communities underrepresented in health
 care research to address disparities in clinical trials
 participation and a lack of racial, ethnic, demographic
 and socioeconomic equity in health data

Jill Tapper, New System Director Precision Medicine and the Precision Medicine Alliance

Jill Tapper joined CommonSpirit Health as the System Director, Precision Medicine and the

Precision Medicine Alliance in June 2022. She has over 20 years of experience leading the development and implementation of geneticand genomic-based precision medicine services, technologies, and programs in the academic medical center, health system, and coercial company settings. Originally trained in cytogenetics, Jill is an accomplished clinical technologist who has multiple peer-reviewed publications in the areas of clinical genetics, cytogenetics, and molecular diagnostics. Her role at CommonSpirit reflects her ongoing commitment to driving adoption and enabling the use of innovative precision medicine approaches that deliver high-quality patient care and improved outcomes.

Genetic Counselors Play Pivotal Role

Genetic counselors and advanced practice nurse genetics specialists use their advanced training in medical genetics and expertise in multiple specialty areas such as oncology, cardiology, neurology, and pediatrics to identify for their patients clinical trial and research study opportunities available within CommonSpirit Health institutions as well as through disease-specific collaborative networks.

Carrie Snyder, Cancer Genetics Nurse Specialist in the CHI Health Creighton Genetics Clinic, has been part of this field since the mid-1990s and had the fortunate opportunity to work in the research laboratory with Dr. Henry T. Lynch, the father of hereditary cancer, from 1995 until 2018. Carrie and the team in Dr. Lynch's laboratory are known for conducting research and publishing findings that created the foundation for hereditary cancer detection, diagnosis and management strategies used in the clinic today.



Like many cancer genetic nurses, Carrie has spent the majority of her time in the clinic providing genetic counseling, cancer risk assessment and genetic result interpretation to patients. Carrie is passionate about the impact cancer genetic risk has on individuals throughout their life.

Individually, we are one drop. Together, we are an ocean.

- Ryunosuke Satoro





Student- and Resident-Based Research

CommonSpirit Health Scholarly Research

The cumulative growth of data-focused scholarly work at CommonSpirit Health continues to trend upward across the enterprise, increasing at a rate of more than 200% in just two and a half years. This tremendous work has been supported by Rae Lynn Stafford of the CommonSpirit Health Research Institute.

In 2020, 129 data studies were started compared to 466 data studies in 2023. Single-site data studies account for 83% of all scholarly research. Data studies at multiple sites also trended steadily upward from only four studies started in FY19 to 24 studies in FY23. The research investigators include physicians, medical and pharmacy residents, student learners, service line leaders, and nurse investigators across all divisions.

SCHOLARLY RESEARCH TOPICS

- Human Trafficking Response
- COVID-19 and Patient Treatment
- Acute Care Quality
- Patient Safety
 Initiatives
- Burnout and Resilience
- Medicine Delivery, Adherence, and Treatment
- Women and Infant Health
- Gender Affirming Quality of Life

Does Live Therapeutic Music Affect Patient Satisfaction of Hospital Experience?

Mary Superak, MS Ed, CMP, Woodland Memorial Hospital (Woodland, CA)

The Spiritual Care Department at Woodland Memorial Hospital (Woodland, California), in collaboration with the Music for Healing and Transition Program, are conducting a research project titled, "Does Live Therapeutic Music Affect Patient Satisfaction of Hospital Experience?".

This data-focused study will compare overall patient satisfaction ratings before live therapeutic music was at the facility to the scores after the program was in use to determine if there is a correlation between live therapeutic music and patient satisfaction. The research is ongoing.

The research is led by
Principal Investigator,
Mary Superak, MS Ed, CMP,
a certified therapeutic
musician and member of
Dignity Health Spiritual Care
Services in the California
Division. Nenhaun Huang,
RN, DNP, a key study team
member, implemented
research procedures,
recorded patient pain scores,
and documented study
observations before and
after live therapeutic music
was offered to patients.

COMPADRE (California Oregon Medical Partnership to Address Disparities in Rural Education and Health)

Mercy Medical Center Redding Family Medicine Residency Program (Redding, CA)

COMPADRE is a physician faculty and residency training program and research collaboration between Dignity Health Mercy Medical Center Redding, Oregon Health Sciences University, and University of California Davis School of Medicine. The Dignity Health investigators for this CommonSpirit Health Research Institute IRB-approved study are Nena Perry, MD and Christine Woroniecki, MA, who oversee the Family Medicine Residency Program at Mercy Medical Center Redding.

COMPADRE leverages a powerful regional coalition to reduce health disparities, strengthen the workforce, and better align medical education with societal needs — in short, reimagining residency.

(Continued on next page.)

COMPADRE was launched in 2020. With physician faculty now COMPADRE trained, Mercy Medical Center Redding will begin enrolling medical residents into COMPADRE to assist them with rotations offered at OHSU and UC Davis COMPADRE sites. UC Davis COMPADRE-enrolled medical students will complete a two-week summer rotation at Mercy Medical Center Redding.

(Continued from previous page.)

COMPADRE aims to reduce health disparities by transforming the physician workforce to be better prepared, more equitably distributed and more deeply connected to underserved communities.

COMPADRE is an educational research study to determine:

- 1. if participation in COMPADRE results in enrollees deciding to practice in underserved areas,
- 2. if COMPADRE learners benefit from wellness activities, and
- 3. if COMPADRE faculty educational skills are enhanced.

Data Research and Residency Program

Dignity Health Marian Regional Medical Center (Santa Maria, CA)

Among the research projects undertaken by the Residency Program at Dignity Health Marian Regional Medical Center (Santa Maria, California) in 2023:

- 1. IRB-Approved residency-wide research project to examine neonatal and maternal outcomes in patients with three or more Cesarean sections who deliver prior
- 2. QI resident project on standardization of labor induction
- 3. Faculty project ("Healthy Mamas") to examine maternal and fetal outcomes for pregnant women with obesity to evaluate the effect of controlled caloric intake/diet on outcomes.
- 4. Continued department-wide QI through the Perinatal Safety Committee and Maternal-Fetal Board.



Principal Investigator Anne Kennard, DO, FACOG

Laurence Shields, MD, FACOG

Principal Investigator San Luis Obispo

Research and Graduate Medical Education Program

Dignity Health St. Joseph's Medical Center (Stockton, CA)

Dignity Health St. Joseph's Medical Center welcomed its first residents in 2018. Since the program's inception, St. Joseph's residents have published more than 40 journal articles and presented at many prestigious conferences, including the American College of Cardiology, the American Psychiatric Association, American Association of Family Practitioners, American Society for Therapeutic Radiology and Oncology, and many more.

Project Highlights

Effect of Masking on Spirometry, Oxygen Saturations and Carbon Dioxide Levels

This was a prospective study examining the effects of surgical face masks and N95 face masks on pulmonary function. Preliminary data has shown that masks affect the pulmonary status of healthy individuals.

Social Determinants of Acute Heart Failure Readmissions in Stockton, California

Investigators studied data of readmitted heart failure patients to determine which zip codes had the highest readmission rates. The objective is to target education and needs for heart failure patient admissions based on zip codes. The findings were presented at the 2023 ACC conference and the abstract was published in JACC.

Hospital-Acquired Pressure Injuries in Adults with Prone Positioning Using Manual Method vs. Specialty Bed: A Retrospective Comparison Cohort Study

This study examined the outcomes related to two proning methods for ventilator-dependent patients and found no difference between the two. This revealed that in times when equipment is not available (pandemics), manual proning can be utilized without compromising patient care. This study was published in the Journal of Wound, Ostomy, and Continence Nursing.

The medical center now has nine programs:

- Family Medicine
- · Internal Medicine
- Emergency Medicine
- Psychiatry
- Anesthesia
- Urology
- Ortho Neurology
- Transition Year

Investigators: Josebelo Chong; Arshi Jha; Joel Rabara; Ishaq Aslam

Investigators: Kumari Karunaratne: Paul Shiu: Parampreet Singh; Cyrus Buhari

Investigators: Jacquie DeMellow; Harbir Dhillon; Mouchumi Bhattacharyya; Daniel Pacitto; Teri Kozik

Many ideas grow better when transplanted into another mind than the one where they sprang up.

Oliver Wendell Holmes,
American jurist and legal scholar (1841-1935)



Academic Facilities

Baylor College of Medicine

As a leading biomedical research center within the world's largest medical complex, Baylor College of Medicine is dedicated to bringing discoveries from bench to bedside. With a reputation built on a broad base of basic science research spanning all areas related to human health and disease, Baylor strives to address contemporary challenges in biomedical research and health care, relying on collaborative teams of scientists and clinicians from multiple disciplines.

Baylor College of Medicine Research Findings

Breast Cancer Research

Breast cancers with HER2 mutations respond to the drug neratinib, but the responses are variable and often not durable. Looking to better understand the underlying cause of this variation, Baylor researchers investigated whether different HER2 mutations drove different responses to therapy. They identified a mutation that conferred therapeutic resistance and promoted metastatic behavior.

Brain Tumor Research

Baylor researchers studied the genetic regulation of brain tumor behavior. Published in the *Proceedings* of the National Academy of Sciences, the study reveals that gene expression regulator Sox9, a wellknown transcription factor, influences brain tumor

behavior in dissimilar ways in different tumor types, revealing the importance of the mechanisms of gene regulation in tumors when planning therapies.

Age-Associated Defects

A randomized, double blind human clinical trial reveals that supplementation with GlyNAC – a combination of glycine and N-acetylcysteine – improves many age-associated defects in older humans and powerfully promotes healthy aging.

Published in the *Journal of Gerontology: Medical Sciences*, improvements were noted in muscle strength, gait speed, exercise capacity, waist circumference and blood pressure.

Liver Cancer Disparities in Texas

Texas has the highest rate of hepatocellular carcinoma (HCC) – the most common form of liver cancer – in the U.S. Researchers at Baylor examined these disparities at the neighborhood level, focusing on measures of social determinants of health, finding that level of economic deprivation in a neighborhood and majority employment in specific industries are associated with increased risk of HCC.

Potential Treatment for Rheumatoid Arthritis-Associated Interstitial Lung Disease

The therapeutic drug pirfenidone is found to be a treatment for rheumatoid arthritis-associated interstitial lung disease by researchers at Baylor College of Medicine, National Jewish Health and sites around the world. This is one of the first studies that has focused on treating patients with rheumatoid arthritis-associated interstitial lung disease. The findings appear in *Lancet Respiratory Medicine*.

Deep Brain Stimulation and OCD

As the use of DBS to alleviate OCD continues to increase, Baylor researchers study the efficacy of the treatment by using data collected from earlier studies. The group's research, recently published in the *Journal of Neurology, Neurosurgery, and Psychiatry*, provides evidence that DBS can improve OCD as well as other related depression symptoms.

Immunotherapy and Mesothelioma

In a study published recently in the journal *Clinical Cancer Research*, researchers at Baylor found that treating patients who have resectable malignant pleural mesothelioma, with immunotherapy ahead of surgery resulted in favorable clinical outcomes.

Reduction of Cholesterol

A study presented at the American College of Cardiology's Annual Scientific Session together with World Congress of Cardiology found that oral PCSK9 inhibitor MK-0616 reduced LDL cholesterol by more than 60%, substantially reduced levels of low-density lipoprotein (LDL) cholesterol in people with high cholesterol and/or heart disease related to clogged arteries.



DEPARTMENTS RANKED IN THE TOP 30 IN NIH FUNDING

- #1 Department of Molecular and Human Genetics
- #2 Department of Neuroscience
- #4 Department of Molecular and Cellular Biology
- #6 Department of Pediatrics
- **#6** Department of Neurosurgery
- **#12** Department of Ophthalmology
- #21 Department of Integrative Physiology
- **#21** Department of Obstetrics and Gynecology
- **#26** Margaret M. and Albert B. Alkek Departmen of Medicine

\$356 million+

Funding from National Institutes of Health to Baylor for FY22

#20

Baylor's rank among U.S. medical schools in NIH funding for FY22

#1

Baylor's rank among Texas medical schools in NIH funding for FY22 (Baylor has ranked first in Texas since 2006)

Academic Facilities

Creighton University Medical Center

The team at Creighton University Medical Center uses its strong infrastructure and collaborative relationships to produce a diverse array of research trials.

Types of Research at Creighton

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Bench Basic Research

· Dermatological cancers led by Laura Hansen, MD

Retrospective Database Research

• Sex differences in atrial fibrillation interventions

Retrospective CHI Data-Based Research

- De-identified data related to COVID-19 disposition
- PHI Chart review for Long COVID with CDC

Prospective RCT (Single or Multicenter)

- Investigator-initiated 3D baby studies
- Urology devices for incontinence (multicenter)
- ACT-IV Remdesivir (industry)

The Creighton School of Medicine-Common Spirit Health academic partnership allows for a richer potential for investigatorinitiated research involving data from CHI as well as collaboration for both clinical research and industry research. One example of this was our participation in the ACT trials involving Remdesivir, which would not have been possible without an academic and clinical partner.

-Maureen R. Tierney, MD, MS Associate Dean, Clinical Research and Public Health Professor

> **ACTIVE 2022 CHITRIALS** Start-up: 15



Enrolling: 9

Follow-up: 13

Closeout: 26

Total Patients Participating: 527

3 cardiology studies with > 90 patients each

NCORP: 56

Translational Hearing Center

Tal Tietz, PhD, Jian Zuo, PhD, and Khalid Bashir, MD

Dual Effect: Kinase Inhibitors And Other Drugs That Alleviate Cisplatin-Induced Acute Kidney Injury and Hearing Loss

Next phase: Clinical trials. Other otoprotective compounds being developed.

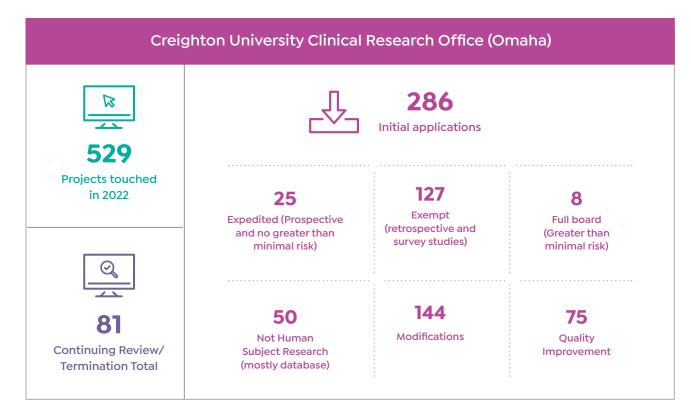
Publications: Ingersoll MA, Malloy EA, Caster LE, Holland EM, Xu Z, Zallocchi M, Currier D, Liu H, He DZZ, Min J, Chen T, Zuo J, Teitz T. BRAF inhibition protects against hearing loss in mice. Sci Adv. 2020 Dec 2;6(49):eabd0561. doi: 10.1126/sciadv.abd0561. PMID: 33268358

Effects of 3D Ultrasonography and 3D Printed Images

John Cote, MD

Funding: Great Plains Idea Funding Development – Effects of 3D Ultrasonography and 3D Printed Images on Maternal-Fetal Attachment and Its Correlation with Overall Smoking within Pregnancy and Smoking Cessation (LB595)

Publications: Coté JJ, Coté BP, Badura-Brack AS. 3D printed models in pregnancy and its utility in improving psychological constructs: a case series. 3D Print Med. 2022 Jun 9;8(1):16. doi: 10.1186/s41205-022-00144-w. PMID: 35678895; PMCID: PMC9178798.



Academic Facilities

Morehouse School of Medicine

Morehouse School of Medicine and CommonSpirit
Health have formed a powerful partnership with
Harvard Medical School/Boston Children's Hospital
and a network of clinical sites across the country. This
collaborative effort is dedicated to enhancing diversity
within the patient population of the NIH's Undiagnosed
Disease Network (UDN).

By combining their collective expertise and resources, they hope to address the existing gaps in access to advanced diagnostic and research capabilities for individuals with undiagnosed and rare diseases. Through close collaboration with health care providers, the Morehouse team seeks to identify undiagnosed and rare disease patients who are likely to benefit from the advanced diagnostic and research capabilities provided by the UDN.

By leveraging their combined expertise and infrastructure, the referral and evaluation process can be streamlined, ensuring that patients receive timely and accurate diagnoses. These efforts extend beyond diagnosis alone; the team is committed to facilitating ongoing care, treatment, and support for patients throughout their journey.

MOREHOUSE SUCCESS STORIES

- 63 patents (2009-2019)
- 5,000 primary care providers and rural hospitals in Georgia received training and assistance in how to adopt and meaningfully use electronic health records.
- A mobile app health network and youth coding program empowering young adults to embrace healthy behaviors and reducing the risk of heart disease.
- Methods for testing the efficacy and safety of natural herbal extracts that can be used as a treatment for HIV and AIDS to improve patient outcomes around the globe.



MORE IN COMMON ALLIANCE

The More in Common Alliance is a 10-year, \$100 million dollar partnership between CommonSpirit Health and Morehouse School of Medicine to transform health equity in the U.S. Under the More in Common umbrella, a research workstream led by Drs. Vani Nilakantan, System Vice President Research, CommonSpirit Health, and Dr. Sandra Harris Hooker, Executive Vice Dean Research and Academic Affairs, has been formed.



The research workstream aims to change the landscape of health care research and drive change based on who we include in clinical research, with focus areas in cardiovascular, cancer, neuroscience, women and infants and population health. The overarching goals are to improve diversity, equity and inclusion in research, enhance joint clinical trials, secure national funding and lead innovation together.

To this end, the group is working on developing a master academic affiliation agreement, has set up an IRB reliance agreement, and has submitted several national grants together. The future state will include large strategic partnerships with industry, life science companies and federal sponsors for technology innovation and precision medicine initiatives.

PARTNERING TO ADVANCE EQUITABLE CARE

The Deloitte Health Equity Institute and Morehouse School of Medicine have partnered to establish a multi-tier, multi-year relationship addressing four discrete focus areas; collaboration will include engagement across Morehouse and with an array of other partners, addressing health inequities in physician training and clinical settings, leading to the comprehensive aim of advancing health equity.



Through the More in Common Alliance partnership, CommonSpirit has been identified as a key partner in the implementation and evaluation of the effort. Through the generous gift from Deloitte, the Lloyd H. Dean Institute for Humankindness and Health Justice and Morehouse Chief Diversity and Inclusion Officer Dr. Walter Conwell have collaboratively developed plans to advance culturally appropriate care initiatives in training the clinical workforce of the future.

These initiatives will involve the creation, implementation and analysis of the Health Equity Operational Capabilities Assessment of More in Common Alliance training sites. This assessment is critical in understanding the impact of the training developed by Morehouse School of Medicine and will continue to inform advancements in culturally competent care.

We may have all come on different ships, but we're in the same boat now.

- Martin Luther King, Jr.



Partner Institutes

Barrow Neurological Institute

Barrow Neurological Institute at Dignity Health St. Joseph's Hospital and Medical Center in Phoenix, Arizona is an international leader in the treatment, research, and education of brain and spinal diseases, conditions, and injuries. Led by Barrow President and CEO Michael T. Lawton, MD, one of the world's top neurosurgeons, the Institute is one of the busiest centers for neurology and neurosurgery in the United States.

In 2022-23, U.S. News & World Report again ranked Barrow as a top center for neurology, neurosurgery, and neuro-rehabilitation in the country. In addition, Newsweek ranks Barrow as one of the best specialty hospitals in the world for neurosurgery. Barrow is certified by The Joint Commission in Comprehensive Stroke, has a Level I trauma center, CARF-accredited neuro-rehabilitation programs, and is home to more certified neuroscience research nurses (CNRN) than any other hospital in the world.

Barrow has contributed to many breakthroughs in neuroscience and neurosurgery, including refining the cardiac standstill procedure, isolating the gene for the inherited form of cerebral cavernous malformations, and pioneering thoracoscopic spinal surgery. Barrow is a leader in harnessing innovative technologies and procedures, such as minimally invasive spine surgery, microscopic techniques, and robotic spine surgery.



HIGHLIGHTS
117,704 patient visits in FY23

58,078 patients treated in FY23

5,593+ Brain and Spine Surgeries Performed Annually

335+ Open Clinical Trials

60+ Neurologists

27 Neurosurgeons

513 Nurses



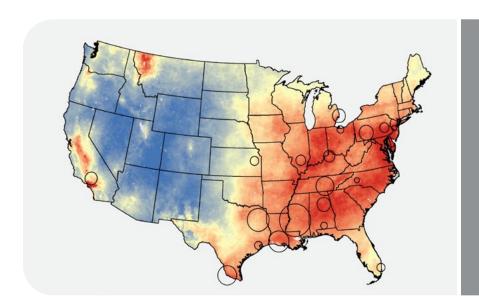
Featured Research: The Role of Air Pollution in Neurodegenerative Diseases Like Parkinson's Disease

Recent studies conducted by Drs. Brittany Krzyzanowski and Brad Racette at Barrow Neurological Institute seek to understand the role of air pollution in neurodegenerative diseases like Parkinson's disease.

The primary aim of these studies is to identify the national geographic patterns of Parkinson's disease and test for nationwide and region-specific associations with particulate matter with a diameter of 2.5 micrometers or smaller (PM2.5). Numerous studies suggest that environmental exposures play a critical role in Parkinson pathogenesis. Large population-based discovery studies have the potential to identify novel PD risk factors.

STUDY SUPPORT

The U.S. Department of Defense (grant # PD190057); The National Institutes of Health – National Institute of Environmental Health Sciences (K01ES028295); The Michael J. Fox Foundation for Parkinson's Research (grant #000939)





Overlay of PM2.5 and Parkinson's Disease (PD) relative risk with warm colors representing areas high in PM2.5; circles represent geographic PD clusters.





Barrow Institute's Ivy Tumor Center **Provides Hope**

Glioblastoma brain tumors often recur and Jenn's did. For those with recurrent glioblastoma, treatment options are very limited, and there is no standard therapy. Not one to take "no" for an answer, Jenn looked for alternatives and found a Phase O clinical trial at the Barrow Neurological Institute's Ivy Brain Tumor Center.

The clinical trial was testing a new drug, AZD1390, which can make tumor cells more vulnerable to radiation therapy. Jenn took the drug for three days before surgery to remove the tumor. Her neurosurgeon, Nader Sanai, MD, removed the brain tumor and the Ivy Center's team of scientists quickly tested it to see if the drug had reached the tumor and had its intended effect. It did. Jenn continued taking the drug during treatment.

"Unfortunately, for those with high-grade gliomas, the battle is never over," says Dr. Sanai, director of the Ivy Brain Tumor Center and director of Neurosurgical Oncology at Barrow Neurological Institute. "We're singularly focused on finding a cure for these aggressive tumors, and Phase 0 clinical trials, like the one Jenn participated in, give us a direct avenue for rapid drug discovery."

Jenn's latest tests and MRI show no signs of brain tumor regrowth. Jenn credits her care team and the clinical trial for saving her life. "I'll do any trial or anything I can do to save my life and anyone else's," she says.

Partner Institutes

Benaroya Research Institute

Seattle. WA

Benaroya Research Institute (BRI) studies the immune system and the wide range of diseases that affect it – including autoimmune diseases, allergies, asthma, cancer and COVID-19. Their mission is to predict, prevent, reverse, and cure diseases of the immune system. Their researchers work to create a detailed picture of the immune system, shepherding \$84 million in research annually, 72% of which is federally funded. BRI is a nonprofit research institute within Virginia Mason Franciscan Health and oversees all clinical research at Virginia Mason Medical Center, including more than 480 research studies ran through the Clinical Research Program.

Highlights By the Numbers

Research Volume Forecast: \$84 million

Publications and Presentations (CY22): 187

Funding: 72% Federal Grants

107 Active Grants

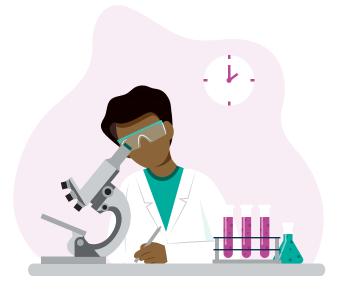
- Federal Prime 29
- Federal Subawards **57**
- Foundation 21

Active Collaborative Research Agreements: 18

Clinical Trial Agreements and Amendments: 122

Principal Investigators: 24

Workforce Members: 325+



VMFH CENTER FOR CARDIOVASCULAR HEALTH RESEARCH HIGHLIGHTS

Repair MR

This is a randomized controlled trial comparing the MitraClip device with surgical repair in patients with severe primary mitral regurgitation.

TRISCEND II

This is a randomized trial designed to compare the EVOQUE Transcatheter Tricuspid Valve replacement System and Optimal Medical

Therapy vs. Optimal Medical Therapy in treating patients with Severe Tricuspid Regurgitation.

CLASP II TR

This trial will evaluate the superiority of the PASCAL Transcatheter Valve Repair System and Optimal Medical Therapy vs. Optimal Medical Therapy in treating patients with Severe Tricuspid

VMFH CENTER FOR DIGESTIVE HEALTH RESEARCH HIGHLIGHTS

In FY23, the Digestive Health team had nearly 120 active research projects, including 30 clinical research trials, published over 40 manuscripts with many more awaiting publication and authored five book chapters.

DREAM (Diabetes Related to Acute Pancreatitis and Its Mechanisms): An observational research trial sponsored by the National Institute of Diabetes and Digestive and Kidney Diseases looking at the relationship between acute pancreatitis and the development of diabetes.

VMFH CENTER FOR NEUROSCIENCES AND SPINE RESEARCH HIGHLIGHTS

Philip Louie. MD. the Center for Neuroscience and Spine's Director of Research and Academics, and the CNS research team have focused on expanding collaboration with the University of Washington's School of Medicine, culminating in students publishing five manuscripts and nine podium presentations and 12 poster presentations across the U.S. and Europe.

TDABC (Time-Driven Activity-Based Costing)

These studies aim to evaluate the combination of TDABC and lean methodologies to detect meaningful variability in time-based care. These studies utilized TDABC to evaluate hip replacement surgeries, lumbar fusion surgeries, and to assess the cost- effectiveness of our multidisciplinary spinal deformity conferences.

GRIT

Grit is defined as trait-level perseverance and passion for long-term goals within challenging domains over and beyond measures of talent. This study and outcomes following elective spine

Socioeconomic Disparities

This study evaluates the impact of various socioeconomic factors (income. insurance, race, education, and others) on the wait time (from initial referral date to spine surgeon consultation) for patients presenting seeking a spine surgeon for low

TEPLIZUMAB APPROVED TO DELAY ONSET OF TYPE 1 DIABETES

In November 2022, the FDA approved teplizumab, a groundbreaking therapy that signals a paradigm shift in treating not only type 1 diabetes (TID) but all autoimmune diseases. Teplizumab targets TID's root cause and can actually delay onset for up to two years – marking major progress in Benaroya Research Institute's push to predict, prevent, reverse and cure autoimmune diseases.

"This is a landmark event for those with or at risk for TID. It also shows, for the first time in any autoimmune disease, that it is feasible to treat a disease early, before it starts," says Carla Greenbaum, MD, director of BRI's Center for Interventional Immunology.

This shift toward prevention is the result of decades of critical research by many scientists around the world, including right here at BRI. TrialNet, a global research consortium dedicated to preventing TID and stopping its progression, ran the pivotal clinical trial that led the FDA to approve teplizumab.

Dr. Greenbaum was TrialNet's chair during the prevention trial in which BRI's clinical research team administered teplizumab and cared for research participants across a five-state region.

"Teplizumab is the first therapy to try to stop the changes that lead to TID. While it doesn't stop TID altogether, the delay in onset is still meaningful," Dr. Greenbaum says. "It gives people two more years without a disease that requires around-the-clock management – and the stress, health, and financial burden that comes with it."

NEW ASTHMA TREATMENT SHOWS PROMISE FOR DISPROPORTIONATELY AFFECTED KIDS

A biologic asthma therapy called mepolizumab can reduce asthma exacerbations among children in low-income Hispanic and Black communities, according to a study published in *The Lancet* in August 2022 from the Inner-City Asthma Consortium (ICAC).

"It's essential to focus on these children because they are more likely to have the disease, more likely to end up in the emergency room, and more likely to die because of asthma – and they are often underrepresented in clinical trials," says Matthew Altman, MD, MPhil, the senior author of the study who conducts asthma research at Benaroya Research Institute.

The study was funded by the National Institute of Allergy and Infectious Diseases and the National Center for Advancing Translational Sciences, both part of the National Institutes of Health, and by GSK. NIAID also funded ICAC, now called the Childhood Asthma in Urban Settings (CAUSE) clinical research network.

Mepolizumab is an eosinophil-targeted treatment, which works by blocking a protein necessary for eosinophil (a type of white blood cell) development.

"Asthma, especially an asthma attack, is typically treated with steroids, which can have serious side effects especially for children," Dr. Altman says. "Eosinophil-targeted therapy is a key breakthrough because this is one of the first asthma therapies to target the actual cells and processes that cause asthma and it is much safer than steroids."



In union, there is strength.

Aesop



Partner Networks

NCORP

CommonSpirit Health is proud to be an active and vital participant in the National Cancer Institute Community Oncology Research Program (NCORP) — a national network of cancer care investigators, providers, academia, and other organizations that care for diverse populations in health systems.

Over the past year, CommonSpirit Oncology Research Alliance (CORA) NCORP increased enrollment in cancer control, prevention and care delivery clinical trials by providing access to a wide portfolio of high-quality research studies that meet the needs of CORA's diverse populations. CORA NCORP continues to focus on expanding Cancer Care Delivery Research and addressing disparities among racial and ethnic minorities and other underrepresented populations in access to cancer care.



CORA NCORP LEADERSHIP AND ADMINISTRATIVE TEAM

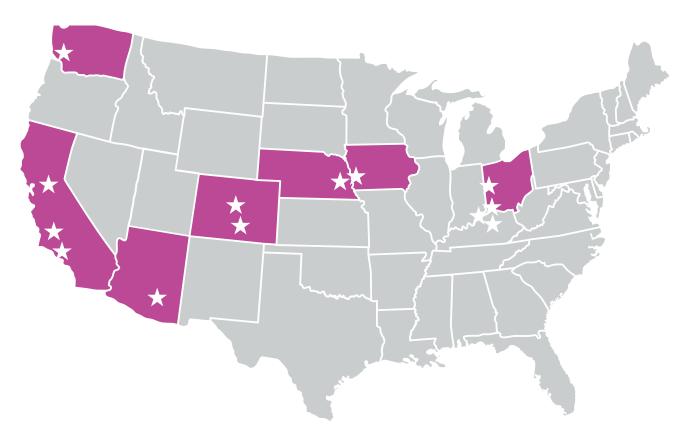
Principal Investigator: Shahzad Siddique, MD

CCDR Lead: Alliyah Beard

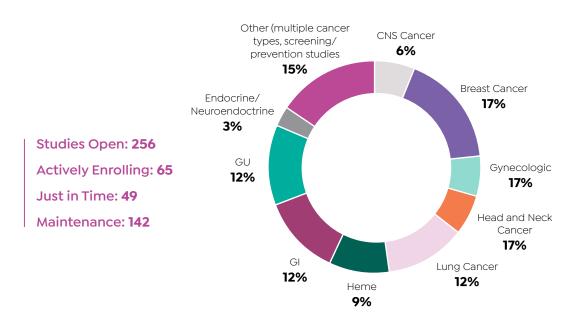
NCORP Administrator: Terah Hardcastle, MS

- Senior Research Program Analyst: Amber Warrick
- Research Program Specialist: Mary Gulzow

CORA NCORP Sites



CORA NCORP 2023 Study Portfolio



Partner Networks

PCORI HSII:

Patient-Centered Outcomes Research Institute Health Systems Implementation Initiative

The Health Systems Implementation Initiative (HSII) is an initiative that the Patient-Centered Outcomes Research Institute (PCORI) began in 2022.

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The goal of PCORI's HSII is to advance the uptake of practice-changing comparative clinical effectiveness research results in care delivery settings. HSII is intended to facilitate lasting change within participating systems and lay groundwork for broader adoption of evidence-based practices.

Through HSII, PCORI will provide funding to HSII participant health care delivery systems to undertake implementation projects to actively advance the adoption of new evidence. These projects will have the goal of promoting the uptake of specific PCORI-funded evidence in practice.

The CommonSpirit Health Research Institute has been selected as one of the 42 participating health systems participating in this five-year initiative. In June 2023, CommonSpirit was awarded a capacity building grant to prepare our research institute to undertake work that will enhance our ability to conduct successful implementation and program evaluation under HSII (PCORI, 2023).

PCORI will be announcing the first implementation funding opportunities this fall. We look forward to the many positive outcomes this HSII collaboration will bring to the CommonSpirit ministry. CommonSpirit is proud to have secured a \$500,000 PCORI HSII infrastructure capacity build grant already.

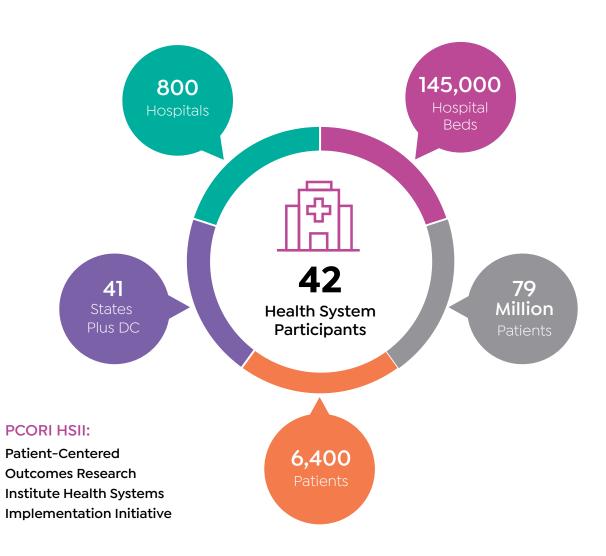
INITIATIVE LEADERSHIP:

Principal Investigator: Thomas McGinn, MD

Key Personnel: Ankita Sagar, MD, Vino Raj, MD, and Brisa Hernandez, PhD

Research Administrative Support: Erin Christian and Julie Link

The Patient-Centered Outcomes Research Institute (PCORI) is an independent, nonprofit research organization that seeks to empower patients and others with actionable information about their health and health care choices. PCORI funds comparative clinical effectiveness research, which compares two or more medical treatments, services, or health practices to help patients and other stakeholders make better informed decisions.



I can do things you cannot, you can do things I cannot; together we can do great things.

Mother Teresa



Philanthropic Support

Research Excellence Equity Fund (REEF)

REEF was created to accelerate CommonSpirit Health's research equity efforts. The fund will provide vital resources to educate communities and diversify clinical trials, ensuring representative outcome data. Representative clinical trials will ensure new treatments, pharmaceuticals, and medical device development account for community-specific conditions and drive better overall health outcomes for all.

From international corporations to grateful individuals, the impact made when you support our research is profound.

HOW YOU CAN HELP

You can help to transform care and create opportunity for future generations by making a gift in support of CommonSpirit Health Research Institute. To do so, contact Paul Richardson at paul.richardson@commonspirit.org or 415.438.5737.

One-time or recurring donations via credit card, check, stock, donor advised funds (DAFs), or crypto currency are welcomed. CommonSpirit Health employees can also utilize payroll deduction to make one-time or recurring gifts.



DONORS SUPPORT WORK TO ADDRESS HEALTH INEQUITY

More than nine million people in the United States experience peripheral artery disease (PAD) each year. Many risk factors are universal; you have a higher chance of developing this disease if you're older than 40 or have underlying chronic health conditions such as diabetes and high blood pressure. But, as is the case with many chronic and potentially life-threatening conditions, one of the greatest risk factors is race.

Despite the fact that Black Americans are at least two times more likely to experience PAD than their white or Hispanic counterparts, they are less likely to be screened or to benefit from early diagnosis and intervention. The results can be grim: Untreated PAD can lead to lower-extremity amputations.

But there is hope. CommonSpirit Health's Office of Diversity, Equity, Inclusion, and Belonging has created a Health Equity Blueprint to address racial and ethnic health disparities that prevent people from accessing care and achieving optimal health outcomes. And with funding from Johnson & Johnson, CommonSpirit is

launching a study to identify specific barriers and facilitators to PAD screening in general clinical care settings.

This study, led by Dr. Keith Jones, will pave the way for a toolkit pilot with a heavy health equity focus, designed to increase PAD screening across various clinical settings in the Sacramento, California, market. Over 12 months, 125 providers will be involved in the pilot, which will clearly demonstrate the efficacy of the new screening protocols being developed. Funding will also support the publishing of a peer-reviewed article on the barriers/facilitators to PAD screening, which will help to inform future research and treatment strategies.

By supporting this study and pilot program, donors like Johnson & Johnson continue to help address the disparities in access to care that have contributed to the disproportionate burden of PAD in certain communities. Donors are contributing to a base of knowledge that will ensure that everyone, regardless of their race, ethnicity or socio-economic background, has access to early diagnosis and treatment for PAD.

GRATEFUL CANCER PATIENT PAYS IT FORWARD FOR OTHERS

Imagine receiving a terminal cancer diagnosis and being told that you have only a short time left to live. It's a heartbreaking and terrifying experience that can leave patients and their families feeling hopeless and helpless. But what if there was a doctor who refused to accept this as the end of the road? What if this doctor developed a highly specialized treatment that gave you not just a few more months or years, but an additional 12 years of life? That's exactly what Dr.

Sonia Reichert, a cancer/oncology physician affiliated with Woodland Memorial Hospital, did for one patient.

Thanks to Dr. Reichert's specialized treatment, this patient was able to enjoy more than a decade of life that he otherwise wouldn't have had. And he was so grateful for this gift of life that he decided to give back in the most generous way possible – by leaving a legacy to support Dr. Reichert's research and work. He believed that if it wasn't for her treatment, he wouldn't have been able to experience the joys of a cancer-free life that he had during those twelve years before passing of other natural causes.

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This grateful patient wanted to see his gifts turn into action and benefit those around him for generations to come. He started his legacy of giving before he passed by donating nearly \$500,000 in gold coins to Woodland Healthcare Foundation to finish funding a new cancer research navigator position.

By supporting Dr. Reichert's research, donors like this amazing grateful patient, can help ensure that more patients have access to the kind of life-saving treatment, trials, and care that saved this grateful patient.

Alone we can do so little; together we can do so much.

Helen Keller





Lloyd H. Dean Institute for Humankindness and Health Justice

Mission-Related Work

CommonSpirit proudly serves our patients and communities with the intention of a simple but powerful phrase: "Hello Humankindness."

Simply put, humankindness is an act of humanity plus an act of kindness, which results in a moment that feeds and heals the human spirit. Supported by scientific research and evidence-based medicine, humankindness can result in more effective treatment planning and patient engagement, faster healing, and higher survival rates in various clinical settings. Over the last year, CommonSpirit has harnessed our shared humanity and value of kindness to create the Lloyd H. Dean Institute for Humankindness & Health Justice ("the Institute"). Led by inaugural president Dr. Alisahah Jackson, the Institute will serve to amplify existing initiatives and create new models of care that prioritize health equity and social justice. It will also create opportunities for innovation in the science of kindness, compassion, empathy, and trust.

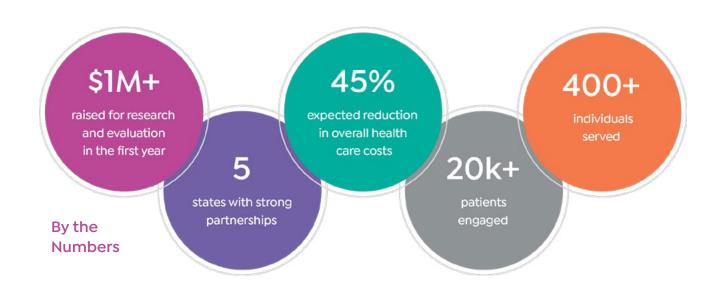
Fully integrating humankindness into our organizational culture is an innovative way of accelerating improvement in health equity and social justice. As health care continues to evolve to meet the needs of our society, let's not forget that everyone wants to be seen and heard, everyone deserves grace, and ultimately, one of the most important things we can do to accelerate health and healing is to treat everyone with kindness and compassion.

Even with the advances made, we acknowledge that there continue to be gaps that are widening for some populations. The time is now to approach the work differently and go back to our humanity. With the belief that kindness is essential to basic human health, the future of health care must move beyond addressing systems and barriers that impact health and well-being and evolve toward health justice.

The Institute is honored to partner with CSHRI to support clinicians in investigator-initiated research opportunities. One example is a project led by Dr. Keith Jones and a multi-departmental team consisting of Jahmal Miller, Dr. Brisa Hernandez, Dr. Vino Raj and Akshat Karambe.

Peripheral arterial disease (PAD) impacts almost 9 million people in the U.S. and its prevalence among adults over 40 years of age is increasing due to risk factors like diabetes, high blood pressure, and an aging population. The burden of the disease disproportionately falls on Black Americans who, at any age, are twice as likely to experience PAD as their white counterparts but less likely to be screened and to benefit from early diagnosis and treatment. Additionally, although PAD was once thought to be more common among men, recent studies show that women are affected at least as often as men but are less likely to be screened and treated.

Acknowledging these disparities, the research team will implement a study titled, "Understanding gaps in Peripheral Arterial Disease (PAD) screening with a focus on equity gaps." The proposed study will seek answers to compelling questions about why PAD screening is underutilized in general care settings and will explore how limited resources, poor awareness on the part of providers and patients, limitations of training in vascular medicine, and other issues are contributing to PAD morbidity and mortality, particularly among Black and Hispanic populations.



As we reflect on the growth and success the CommonSpirit Health Research Institute has seen in the past year, we are excited for what is ahead.

Our goals for the near future include continuing our work toward standardizing our processes and our approaches; identifying more ways to collectively apply for large grants; and building on the relationships, both internal and external, which have proved so fruitful thus far.

Our hope for the future of our industry as a whole is to improve access to clinical trials for the patients who need them. Patient understanding and involvement is a vital element of successful research trials and we plan to support that by putting tools and processes in place to empower patients to better partner with their clinical research team.

Finally, we look forward to continuing to build on the collaborative relationships that have made our work possible thus far. Research involves many people with many different skillsets and experiences, coming together for the common good. We are proud to be part of this transformative work.





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