Bethany Kwan: https://coprhcon.learningtimesevents.org/wp-content/uploads/2021/05/Norton-WE-PRECIS-2-PS-COPRH-Handout-5.14.2021-2 notes.pdf

Russell Glasgow: The PRECIS tool currently on ACORDS website is on general, older version...not on new PRECIS-PS that Dr. Norton is discussing

Cynthia Vinson (NCI): URL is in her handout and can be found here: http://www.precis-2.org/

Bethany Kwan: This is so great! It feels like a much better fit than the classic PRECIS-2 for our hybrid implementation-effectiveness trials

rodgerkessler: It is a great snapshot of the direction of a trial.

Bethany Kwan: I can see how this would be really helpful in planning and early implementation of a trial - we get a lot of questions in the pre-implementation phase from the settings and providers about what flexibility there is, and it would be good to think about this in advance

Russell Glasgow: GREAT WORK....what about use of PRECIS-2PS for higher socio-ecologic level- e.g., setting or community level interventions in multi-level study.... Should we make this version work.. or is that PRECIS-3?

Sunmi CHOI: score 1-5

rodgerkessler: Socio ecological domain is right on target, and important to focusing on different populations.

Bethany Kwan: Can you talk some more about the differences between the two flexibility components?

Sunmi CHOI: how can measure score 1-5

Russell Glasgow: THANKS MUCH- VERY 'PRAGMATIC' TOOL..FOR TEAMS

Eve-Lynn Nelson: new to the tool, has it been used in settings other than primary care, such as with schools? Thank you!

Bethany Kwan: @Sunmi, it's a matter of perception, i.e., it's subjective. Typically you have stakeholders rate different components of the study design as whether they think it represents a very carefully controlled (and not terribly like real world care) context - that would be a 1; whereas very open and flexible and like usual care context, ie it sounds like how care is usually delivered - that would be a 5

Russell Glasgow: Might remind is rating arial and not intervention

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