# Table of Contents

Letter from our Directors ........................................ 1  
What is SNOCAP? ...................................................... 2  
Mission and Structure .............................................. 3  
Year at a Glance ...................................................... 4  
Priority Setting ...................................................... 5  
Priority Topics ...................................................... 6  
Summary of Networks .............................................. 7  
  BIGHORN ............................................................ 8  
  CaReNet ............................................................. 9  
  COCONet ........................................................... 10  
  HPRN ................................................................. 11  
  PEACHnet .......................................................... 12  
SNOCAP Projects ................................................... 13

Visit our website to view this report's appendices and glossary:
Dear SNOCAP friends and colleagues,

2023 was a very active year for SNOCAP. This past year, we worked on a wide variety of projects with so many incredible partners, we addressed many previous priority health topics, and we experienced a change in our overall leadership structure.

As you review this year’s 2023 SNOCAP Annual Report, you will see how work continued to evolve and expand, partnerships grew wider and deeper, and you’ll see ways that we covered many of the priority topics discussed.

As with our previous annual report, we’ve made this 2023 annual report succinct, with embedded links to places on our website where you can go for further information. We have also created a separate Appendix document to review full project, publication, and presentation details. Please take advantage of these additional links.

We wish to thank Dr. Don Nease for his tenure in leading both SNOCAP and the CaReNet PBRN. His leadership led to many wonderful partnerships, and we look forward to continued success for him as he continues to lead and engage in many SNOCAP projects. As for the overall SNOCAP leadership structure moving forward, the directors of each SNOCAP PBRN are working together to support the infrastructure at this time.

We would be remiss to not call out the incredible efforts of Allison Sands, our SNOCAP Administrative Coordinator. Allison—your leadership in this effort is invaluable; this report truly would not have been completed without your diligent support.

On behalf of our entire SNOCAP directors’ group, I invite you to engage with us as we continue to move forward in leading the charge for healthier communities.

Thank you for your ongoing interest and support of our work, be in touch!

SNOCAP PBRN Directors and Staff:

None of this work would be possible without the generous support from the University of Colorado’s Department of Family Medicine, ACCORDS, CCTSI, and our many other partners.
What is SNOCAP?

SNOCAP (State Networks of Colorado Ambulatory* Practices and Partners) is the collaborative affiliation of five practice-based research networks (PBRNs) in Colorado.

*Ambulatory settings are where most people get their care.

Each PBRN network engages with communities that have significant variation in size, location, and populations served. Member networks benefit from shared PBRN resources, including staff and streamlined communication. Networks and practices lead and participate in research projects, which aim to address the specific needs reported by primary care practices in a given region or across the state. This type of practice engagement increases the generalizability of our study findings to primary care practices and communities across the country.
Mission and Structure

Together, we are leading the charge for healthier communities.

Network Structure

SNOCAP comprises five practice-based research networks (PBRNs), each with their own staff and unique structures. Because of the variation in size, location, populations served, and organizational structures, research conducted across SNOCAP may be more generalizable than that conducted in more uniform PBRNs elsewhere. As seen below, SNOCAP operates as an 'umbrella' organization for the five individual networks working state-wide.
Year at a Glance

38 active projects

16 priority topics

11 presentations

$27.3 mil in currently funded projects
Annually, PBRN researchers, staff, and practice, community, and patient partners come together to set new priorities for SNOCAP researchers, practices, and partners for the coming years. This process helps to identify topics that are meaningful and important to partners statewide. Since 2014, more than thirty unique priority topics have resulted from this process, ranging from specific diagnoses like COPD and diabetes to social issues affecting health like gun violence and discrimination. These topics have been sorted into seven categories, with many topics spanning more than one category. You can find a complete list of SNOCAP's priorities (2014-2022) in this report's appendix.

This priority setting process often occurs at SNOCAP's convocation, typically held annually. SNOCAP did not host a convocation in 2023, instead collaborating with other health-equity-focused programs on CU's campus to host a conference in March 2024. This conference included a priority setting session for SNOCAP’s partners to explore previously identified priority areas and how SNOCAP can best pursue these priorities.

The priorities SNOCAP's researchers and partners have identified since 2014 fall into seven categories:

- **Accessibility**
  - for example: healthcare access, support systems
  - 7 topics

- **Health Equity**
  - for example: incarceration, discrimination
  - 17 topics

- **Interventions**
  - for example: immunization, care management
  - 3 topics

- **Mental Health**
  - for example: dementia, substance abuse
  - 14 topics

- **Physical Health**
  - for example: diabetes and obesity, reproductive health
  - 11 topics

- **Populations**
  - for example: pediatrics, older adults
  - 4 topics

- **Practices**
  - for example: burnout, practice resources
  - 10 topics

*Some priorities fit into to multiple categories.*
Below are topics from SNOCAP priority setting sessions in recent years. Look for these icons throughout the report to find where these topics are being addressed within our current work.

- COPD
  - Page: 11
- Diabetes
  - Page: 11
- Health Equity
  - Page: 12
- Social Determinants of Health
  - Page: 12
- Dementia
  - Page: 9
- Elderly Health
  - Page: 9
- Alcohol & Drug Misuse Interventions
  - Page: 13
- Immunization Delivery, Hesitance, & Refusal
  - Page: 10
- Social Isolation & Loneliness
  - Pages: 9, 11
- Reproductive Health & Justice
- Affordable & High Quality Childcare
- Mental Healthcare Access & Community Resources
  - Page: 9
- Implementation & Practice Resources
  - Pages: 8, 12
- Pediatric Mental Health
  - Page: 8
- Substance Abuse/Mental Health Overlap
  - Page: 13
- Workforce Burnout & Staffing
BIGHORN is a network of private primary care practices in Colorado comprised of practices representative of busy communities in both urban and rural areas across the state. BIGHORN’s mission is to transform a network of private practices into a community of reflective, investigative practices and their patients, thereby enhancing the quality, safety, efficiency, and accessibility of primary care health through practice-based research.

For more information about BIGHORN, visit our website:

Projects & Grants

AHRQ Action4 Task Force: Shared Decision Making in collaboration with HPRN

**PI** Mark Gritz & Laura Scherer

**funded by AHRQ**

**Action4** is a Task Order for the revision and implementation test of a shared decision making curriculum (SHARE) created by AHRQ. BIGHORN practices were active in the revision of the curriculum; HPRN practices (and practice liaison) participated in the implementation study.

Practice Facilitation to Enhance Implementation of a Pediatric Suicide Prevention Care Pathway in collaboration with PEACHnet

**PI** Andrea Nederveld

**funded by the NIMH**

This project is a pilot test of practice-based education and screening intervention in primary care.
CaReNet is a network of both urban and rural practices, located along the front range and in the San Luis Valley (SLV) in south central Colorado. CaReNet is committed to questions with the potential to understand health, disease, illness, and the roles and values of primary care, with a particular focus on disadvantaged populations.

For more information about CaReNet, visit our website:

**Projects & Grants**

**MemoryTech**

*Extraordinary Partners in Dementia: UCH Health Capacity for Pragmatic Interventions*

MemoryTech aims to understand Persons Living with Dementia and care partner perspectives on dementia health IT tools, focusing on underserved populations; to assess clinician preferences related to implementation and sustainability of dementia health IT tools in outpatient workflows; and to plan for embedded dementia health IT tool trials through building EHR capacity. The PPRC were active partners in this work.

**CaReNet PPRC**

*Patient Partners Research Council*

In mid-2018, the CaReNet PPRC began discussing struggles they had experienced with caring for loved ones with Alzheimer’s disease and dementia, as many in the group have served in this caregiver role or have had close loved ones that they have seen struggle with these diseases.

Since then, the PPRC has worked with over 6 PIs to learn more about and partner on works related to elderly care, Alzheimer’s disease, dementia, the role of the caregiver, social isolation, loneliness, and mental health. The group is actively working with several researchers at the University of Colorado to partner on work that is meaningful to them.
COCONet is a network of pediatric and child health focused practices that work to improve the health and well-being of Colorado children and families. COCONet's mission is to conduct collaborative practice-based research and quality improvement that informs real-world clinical practice.

For more information about COCONet, visit our website: [COCONet website]

**Network Advisory Board**

COCONet has a Network Advisory Board (NAB), as well as a Steering Committee, that both meet as-needed to discuss priority topics and to participate in projects and grant writing. The COCONet NAB meets each quarter and focuses meetings on current and developing projects.

**Projects & Grants**

**Evaluation of the Presumptively Initiating Vaccination and Optimizing Talk with Motivational Interviewing (PIVOT with MI) Intervention**

- **PI:** Sean O'Leary and Doug Opel
- **Funded by the NICHD/NIH**
- The overall goal of this project is to evaluate the impact of a novel and innovative provider communication strategy utilizing motivational interviewing on vaccine acceptance for infants among vaccine-hesitant parents.

**Cover Colorado**

- **PI:** Sean O'Leary
- **Funded by CDPHE**
- The goal of this project is to use the rapid Boot Camp Translation (r-BCT) method to design and deliver locally and culturally relevant interventions designed to increase COVID-19 vaccinations among adolescents.

**Director:** Sean O'Leary  
**Associate Director:** Sarah Brewer

For more information, visit [COCONet website].
Established in 1997, HPRN is an integrated rural network of clinicians and health care facilities located in the 16 counties of eastern rural Colorado. HPRN's mission is to provide excellent rural health care by translating the best scientific evidence into everyday clinical practice.

**Community Advisory Council**

The HPRN Community Advisory Council (CAC) was established in 2003 and consists of a "grassroots" group of local residents with diverse experiences and perspectives. The CAC combines science with community knowledge to benefit people living in eastern Colorado.

**Projects & Grants**

**Tackling Loneliness with rural Communities (TLC)**

*PI* Rebecca Mullen & Maret Felzien

*TLC* is a pilot study with the High Plains Research Network Community Advisory Council to explore perceptions and experiences of loneliness in people living in rural eastern Colorado as well as their strategies of coping with loneliness.

**Prevent T2+ Choice**

*PI* Elizabeth Thomas

*Funded by American Diabetes Association*

Allowing people to choose from a variety of evidence-based dietary options may improve adherence to diet plans for people with prediabetes and ultimately decrease risk for diabetes. "Choice" is a pilot study to create, implement, and evaluate the feasibility and acceptability of the PreventT2+Choice program, which gives participants a choice of dietary options and includes other features tailored to rural communities.

**Publications & Presentations**

HPRN projects were presented at three conferences and published in two peer-reviewed journals in 2023, including the Journal of the American Medical Association (JAMA).
Started in 2017, PEACHnet serves primary care practices on the western slope. The network connects practices and practitioners with health care related organizations ranging from academic institutions to Health Information Technology companies.

For more information about PEACHnet, visit our website:

Regional Advisory Board

PEACHnet's Regional Advisory Board (RAB) meets as needed to provide input on the network’s projects. Members of the RAB have served on project advisory committees for PEACHnet projects, and are an important thought partner for network projects.

Publications & Presentations

PEACHnet projects were presented at two conferences and published in seven peer-reviewed journals in 2023.

Projects & Grants

Recognizing Adults with Developmental Disabilities in Self-Advocacy Through Engagement (RADIATE)

PI: Andrea Nederveld

RADIATE is a project supported by a Eugene Washington Engagement Award intended to develop community coalitions and a research agenda focused on young adults with intellectual and developmental disabilities, health promotion and social needs.

Helping Our Patients Engage in Weight Management (HOPE)

PI: Andrea Nederveld & Jodi Holtrop

HOPE is an implementation project aimed at assisting primary care practices to implement evidence-based strategies to support patient weight loss/management. 30 participating practices, about 2/3 from CO, the rest from other states. Started March 2023 and is for 3 years.

Funded by PCORI

$
SNOCAP Projects

SNOCAP-wide projects are collaborations between two or more practice-based research networks (PBRNs). Selected SNOCAP-wide projects are highlighted on this page. Additional collaborations can be found in the appendix.

Home vs. Office Medication Effectiveness Research (HOMER)

**PI:** Don Nease & Linda Zittleman  
**Funded by:** PCORI

HOMER is a randomized comparative-effectiveness trial comparing patient outcomes based on induction setting (first phase of treatment with buprenorphine): home vs office vs telehealth. Results will help practices and patients understand which method is best based on individual patient needs and characteristics.

Screening, Brief Intervention, and Referral to Treatment (SBIRT) Implementation

**PI:** Linda Zittleman  
**Funded by:** Peer Assistant Services, Inc.

SBIRT provides training and facilitation for rural primary care practices to implement recommended screening, brief intervention, and referral to treatment best practices, helping meet a need for brief behavioral counseling for unhealthy alcohol use and drug use in rural communities that typically have fewer behavioral health services. CaReNet SLV practices are highly engaged in this work.

Facilitating Alcohol Screening and Treatment (FAST)

**PI:** Perry Dickinsonson  
**Funded by:** AHRQ

Cluster randomized trial to examine effectiveness and relative value of two approaches to supporting primary care practices to improve their identification and treatment of unhealthy alcohol use among adults, including screening, brief intervention, medication assisted therapy, and referral to treatment.