

# SNOCAP ANNUAL REPORT



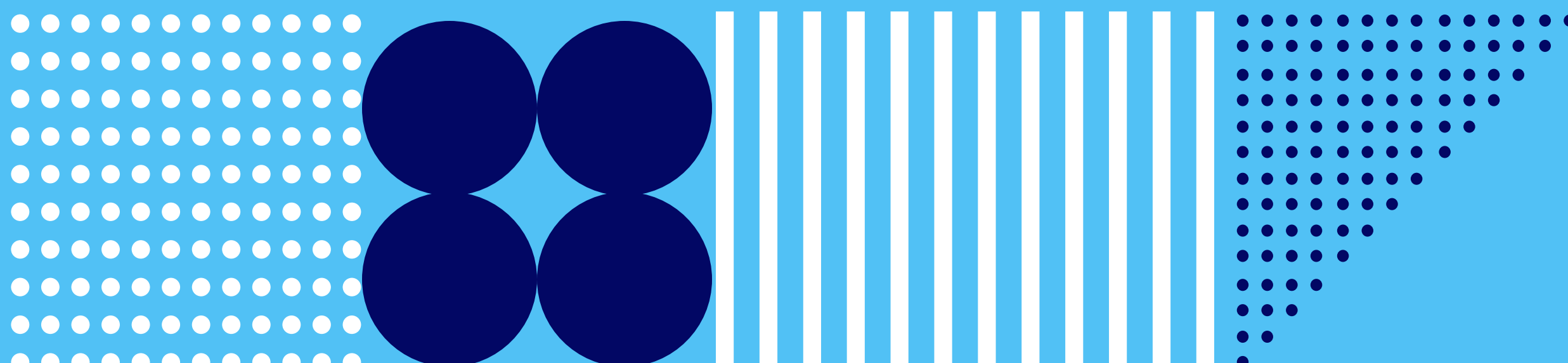
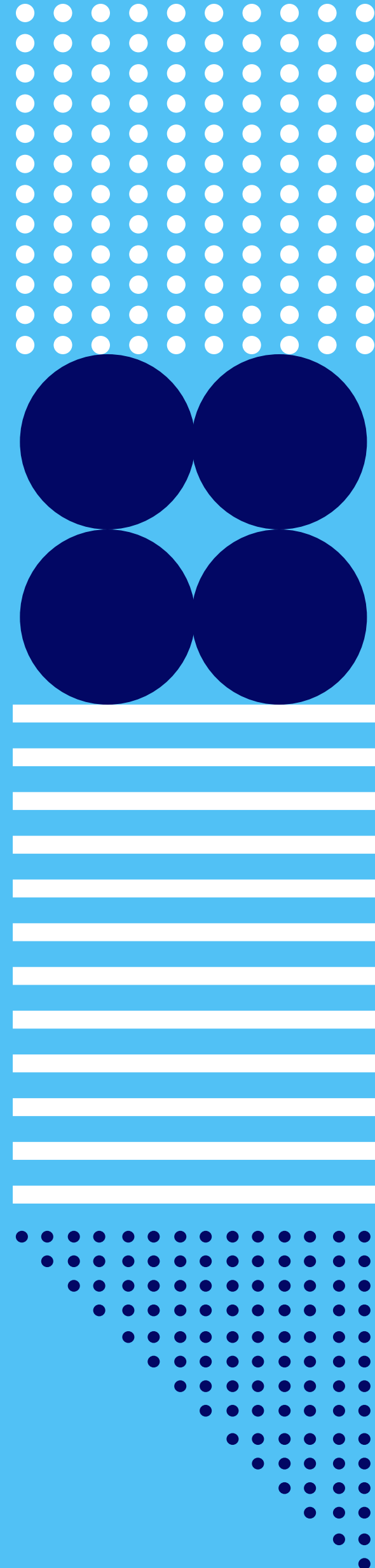
## SNOCAP

State Network of Colorado Ambulatory Practices & Partners

# 2021

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# Letter from our Director

Welcome to our first annual SNOCAP report. It is not a coincidence that this report comes on the heels of two years of the COVID-19 pandemic. In years prior, our annual gatherings served as a way to celebrate and share our work with our partner practices, community members and other stakeholders. Of course for the past two years these gatherings have not happened, and we therefore decided it was time to share and celebrate our work in the format of an annual report.

The report is designed to be viewed on the screen, but can be printed as well. We've tried to highlight the various aspects of our work in an easy to read infographic format, but the details are available in the appendix or just a click away via the internet.



Start by checking out the table of contents, and from there you can easily navigate to topics or areas of interest. Note, there are lots of figures and counts of things, which we feel are important to track and share, but there are also lots of less tangible ways that this work “counts” in ways that impact practices and communities. We have tried to include some quotes from interviews and other sources that hopefully begin to give a sense of that impact. I encourage you to look for those!

Finally we welcome your feedback and comments. SNOCAP is first and foremost a joint effort which we on the University side have the privilege of coordinating. But we could not accomplish any of this without the efforts of our partners in practices and communities around the state. If you are one of those, thank you. This is your work, which we are privileged to help bring to fruition.

Don Nease 

[donald.nease@cuanschutz.edu](mailto:donald.nease@cuanschutz.edu)

None of this 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 is the State Network of Colorado Ambulatory Practices and Partners. SNOCAP is the collaborative affiliation of practice-based research networks in Colorado that joined together to improve communication, facilitate joint research projects, and share research staff and resources.**



# SNOCAP

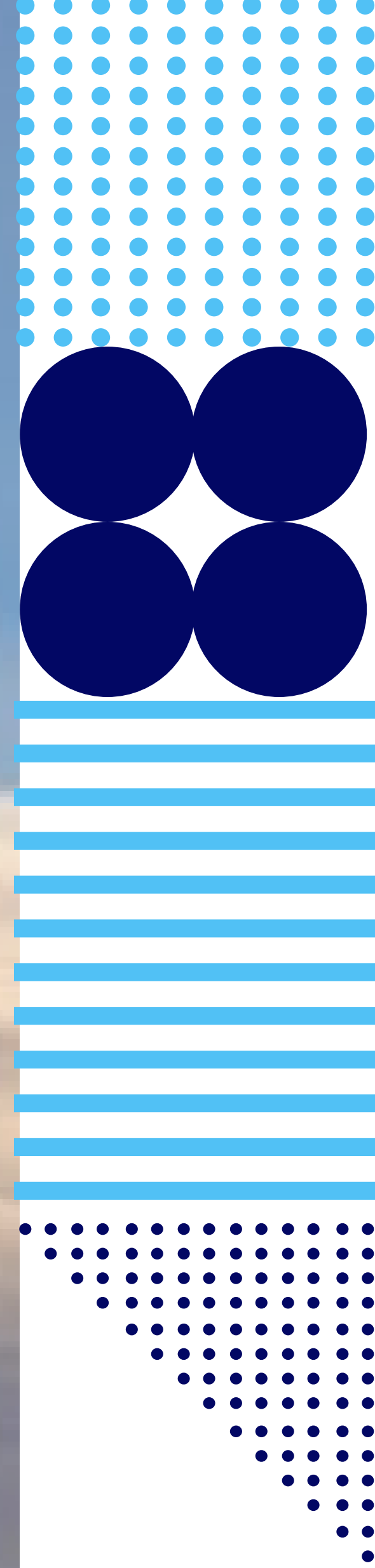
State Network of Colorado Ambulatory Practices & Partners

**Because of the variation in size, location, populations served, and organizational structure, research conducted across SNOCAP is more generalizable than that conducted in more uniform Practice-Based Research Networks (PBRNs) elsewhere.**



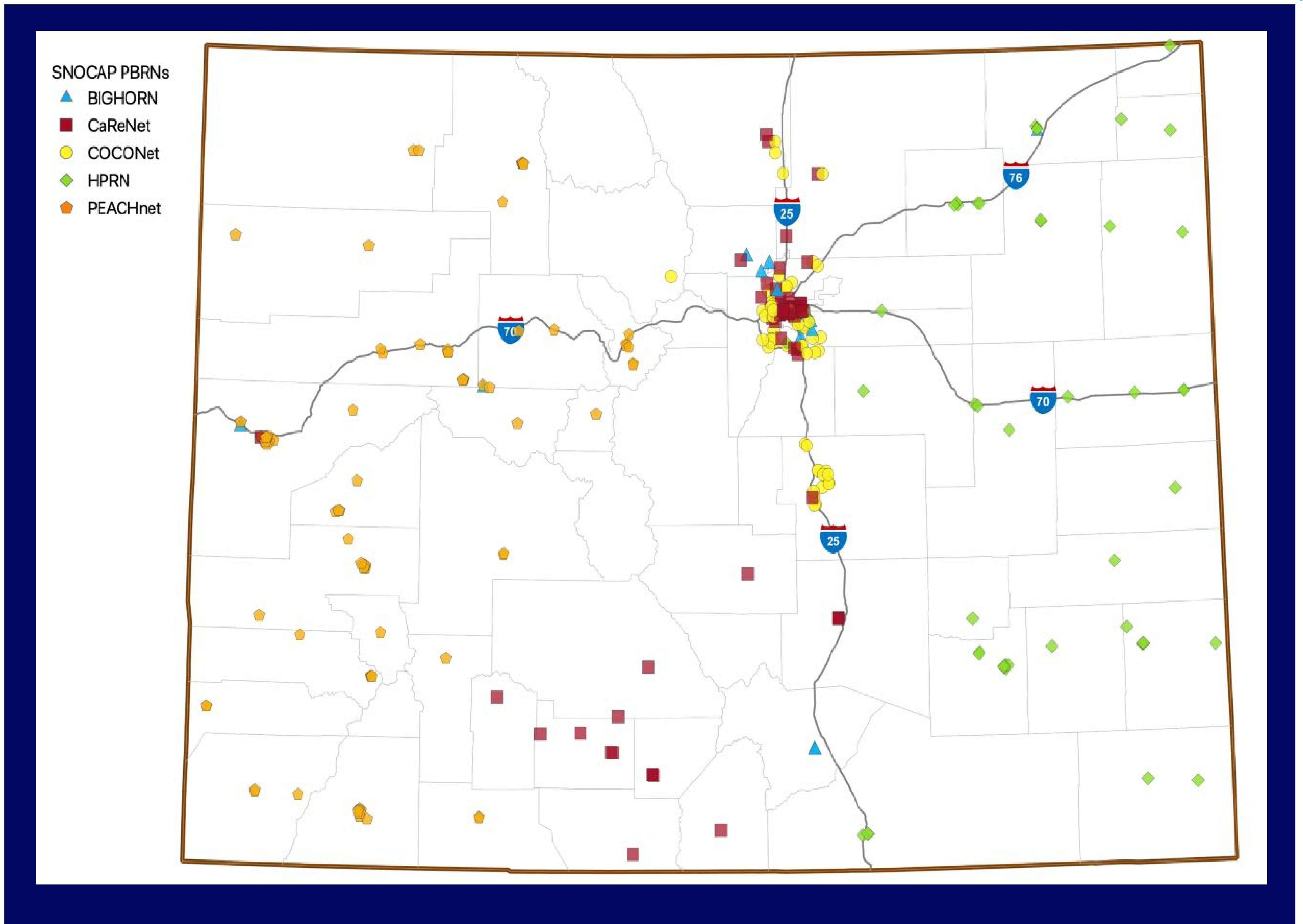
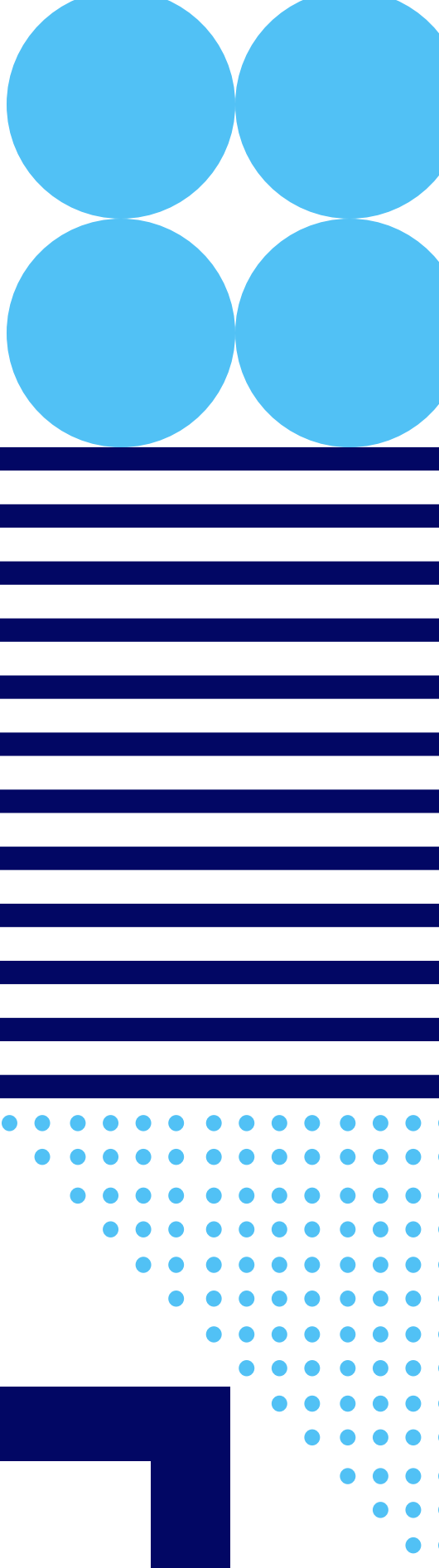


**We are  
leading the  
charge for  
healthier  
communities.**





# Communities/Partners Served



**SNOCAP partners with 282 practices state-wide**

**49%**

of practices are  
located in a  
Urban/Suburban area

**51%**

of practices are  
located in a  
Rural/Frontier area



# Summary of SNOCAP Networks



[Click on the PBRN Network names to view their websites.](#)

## BIGHORN

[Building InvestiGative practices for better Health](#)

[Outcomes Research Network \(BIGHORN\)](#) is a network of private primary care practices in Colorado.

Director: Doug Fernald [doug.fernalld@cuanschutz.edu](mailto:doug.fernalld@cuanschutz.edu)

### About:

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 health care through practice-based research. This network comprises practices representative of busy community practices in both urban and rural areas across Colorado. BIGHORN has completed studies on patient safety, underinsurance, direct-to-consumer advertising, health information technology, and chronic pain with funding from the Centers for Disease Control and Prevention, Agency for Healthcare Research and Quality (AHRQ), and National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK).



## CaReNet

[Colorado Research Network \(CaReNet\)](#) is a network of practices that care for disadvantaged populations, including Federally Qualified Health Centers (FQHCs), FQHC look-alikes, and residency practices.

Director: Don Nease [donald.nease@cuanschutz.edu](mailto:donald.nease@cuanschutz.edu),

Manager: Mary Fisher [mary.fisher@cuanschutz.edu](mailto:mary.fisher@cuanschutz.edu)



**About:** CaReNet is a network of nearly 450 clinicians (family physicians, general internists, general pediatricians, and nurse practitioners) in both urban and rural practices (federally qualified health centers, community health center clinics, residency training sites, and university affiliated private practices). CaReNet practices are located along the front range, as well as in the San Luis Valley (SLV) in south central Colorado. To note: the SLV has <50,000 residents in 6 counties, 8,188 sq mi, has a rich Hispanic heritage and residents are primarily non-Hispanic white (54%) and Hispanic (46%). Four of the six counties are designated 'Frontier' and 3 are designated as Health Professional Shortage Areas and a Medically Underserved Area. CaReNet was created in 1998 with a mission to improve health and well-being by the application of scientific methods to questions important to primary care clinicians, their patients, and their communities, with a particular focus on disadvantaged populations. CaReNet has completed studies on patient safety, practice redesign for chronic disease, mental health issues, self-management support, and healthy behaviors. The network has received funding from AHRQ, the National Heart, Lung, and Blood Institute, HRSA, the Robert Wood Johnson Foundation (RWJF), the National Cancer Institute, the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), Patient-Centered Outcomes Research Institute, and local foundations. CaReNet has an active Patient Partners Research Council, in existence since 2004, which consists of 11 patient partners who live, work, and play in the Denver/Aurora metro area of Colorado. This group is staffed out of the University of Colorado Anschutz Medical Campus in the Department of Family Medicine



# COCONet

Colorado Children's Outcomes Network (COCONet) is a network of pediatric and child health focused practices.

**Director:** Sean O'Leary [sean.oleary@cuanschutz.edu](mailto:sean.oleary@cuanschutz.edu)

**Associate-Director:** Sarah Brewer [sarah.brewer@cuanschutz.edu](mailto:sarah.brewer@cuanschutz.edu)

**About:** COCONet is a network that works with pediatric medical practices to improve the health and well-being of Colorado children and families. The mission of COCONet is to conduct collaborative practice-based research and quality improvement that informs real-world clinical practice to improve the health and well-being of Colorado children and families. COCONet supports and conducts studies and projects to improve children's health. Projects have included topics such as improving immunization coverage, physician communication with patients and parents, referral systems, and mental health integration. COCONet is committed to connecting practicing physicians and researchers to examine the most pressing questions facing pediatric providers in Colorado. 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. COCONet has received funding from Patient-Centered Outcomes Research Institute (PCORI), National Institute of Allergy and Infectious Diseases (NIAID), and elsewhere.



# HPRN

High Plains Research Network (HPRN) is a geographically based network of health care teams in rural eastern Colorado.

**Director:** Tamara Oser [tamara.oser@cuanschutz.edu](mailto:tamara.oser@cuanschutz.edu)

**Co-Director:** Linda Zittleman [linda.zittleman@cuanschutz.edu](mailto:linda.zittleman@cuanschutz.edu)

**About:** Established in 1997, HPRN is an integrated rural network of clinicians and health care facilities located in the 16 counties of eastern rural Colorado. The HPRN region covers 30,000 square miles and is home to approximately 150,000 people, 30% of whom are Hispanic. HPRN includes 16 hospitals ranging from six to 40 acute care beds all between 50 and 180 miles from the closest tertiary care center, 53 primary care practices, 15 nursing homes, 3 home health agencies, 4 public health departments, and 3 hospice organizations. Eight of the Colorado counties served by HPRN clinics have been officially designated Health Professional Shortage Areas, and 4 are Medically Underserved Area. HPRN's mission is to provide excellent rural health care by translating the best scientific evidence into every day clinical practice. Since its first study which assessed the use of new medical technology in rural hospitals, HPRN's studies have studied new interventions that support colon cancer screening; chronic disease diagnosis, treatment, and management (asthma, cancer survivorship care, opioid use disorder, hypertension); test diagnostic tools in primary care (chronic obstructive pulmonary disease); and describe patient, practice staff, and clinicians' knowledge and attitudes on a range of topics (underinsurance, behavioral health integration, patient centered medical home). HPRN research has been funded by the Centers for Disease Control and Prevention, Agency for Healthcare Research and Quality, Robert Wood Johnson Foundation, National Cancer Institute, National Institute of Nursing Research (NINR) Patient Centered Outcomes Research Institute, The Colorado Health Foundation, Caring for Colorado Foundation, Colorado Department of Public Health and Environment. The HPRN has an active Community Advisory Council (C.A.C.) that was established in 2003 and consists of 12 local residents of eastern Colorado, including farmers, ranchers, teachers, para-health professionals, small business workers, office workers, students, and retirees. By joining the best science with the best community knowledge, HPRN and the C.A.C. can produce something better than either could alone.



# PEACHnet

Partners Engaged in Achieving Change in Health (PEACHnet) is a geographically-based network of health care providers along the Western Slope of Colorado.

**Director:** Anne Nederveld [andrea.nederveld@cuanschutz.edu](mailto:andrea.nederveld@cuanschutz.edu)

**Assistant Director:** Elena Broaddus [elena.broaddus@cuanschutz.edu](mailto:elena.broaddus@cuanschutz.edu)

**About:** Starting in 2017, interest for starting a new PBRN on the Western Slope grew as a few practices became involved in PBRN projects and recognized that very few others were involved. In addition, there are issues specific to the geographic region that likely require asking different questions and potentially using different research strategies to answer them. The model for this PBRN is one that includes health care related organizations as well as practices and practitioners, as well as several different organizations ranging from academic institutions to Health Information Technology companies. Due to this scope of involvement, the network is called PEACHnet, which stands for Partners Engaged in Achieving Change in Healthcare Network. Currently, a small steering committee has been formed and staff has been starting to reach out to practices and organizations across the Western Slope. They are actively working to develop project ideas to attract practices and help to increase understanding of the incredible benefits PBRN projects can bring to communities. Funding for PEACHnet has come from Patient-Centered Outcomes Research Institute (PCORI) and the American Cancer Society. PEACHNet is actively working to create a Regional Advisory Board (RAB) as of 2019. The RAB will be composed of stakeholder groups including patients, health care workers, and community members from various organizations. This group will include 10 to 12 people and will meet monthly starting in July 2019. The name, "Regional Advisory Board," is being used to emphasize that PEACHnet includes practices and communities across a geographic region.





# Reflection on Health and Community Connection



Aspen Times, December 27th, 2020



**COVID-19 and the many protests and social justice movements over the past two years have shown us how community and health are so closely joined. Without thriving communities where all members have opportunity, health suffers. Without thriving primary care, community suffers. We are in this together, and no part of our community can be allowed to suffer without the entire community being impacted.**



# COVID-19 Response

As COVID-19 became a topic of interest and concern within the United States, SNOCAP decided that the ***voice of practices had to be heard***. We needed to ***better understand*** what was going on within practices state-wide to best determine how to ***support and advocate***.

## SURVEY OVERVIEW



**819 responses** across  
**11 surveys** conducted  
from **March 2020** to  
**December 2021**.

## RESULT DISTRIBUTION



Survey data was summarized into **survey results** and **Resources Reports** as well as **Workflow Changes** and **Practice Challenges and Successes** infographics.

## MAJOR SURVEY TRENDS



- COVID-19 threatened the **financial survival** of practices **THROUGHOUT** the pandemic.
- The use of **telehealth/virtual visits** **INCREASED** at the start of the pandemic, but has since **DECREASED** due to the resumption of in-clinic visits.
- Practices have had **INCREASED** **access to sufficient COVID-19 testing** as the pandemic has progressed.

***Rapid surveying and return of results*** allowed for regular check-ins with PBRN partners, ***continued partnership development, and having information when needed*** to advocate for help and support.

Resources that we were told would be helpful were: ***Virtual Community Forums and Presentations, Short Video Series, Resource Spreadsheets***



**Scan to view all  
of our COVID Work**

## Were the COVID-19 Practice Survey Reports useful?

Kate Hartzel shared that she and others in her SW CO region frequently used the COVID-19 Practice Survey Reports when talking with other partners. She found the **rapid turnaround of results** incredibly helpful. The **visual report** was easy to understand and provided a great **snapshot** of what was happening across the state.



# COVID-19 Survey Highlights





# Summary of SNOCAP Projects

23

Active projects

17

Funding sources

\$23.7 mil

in currently funded projects

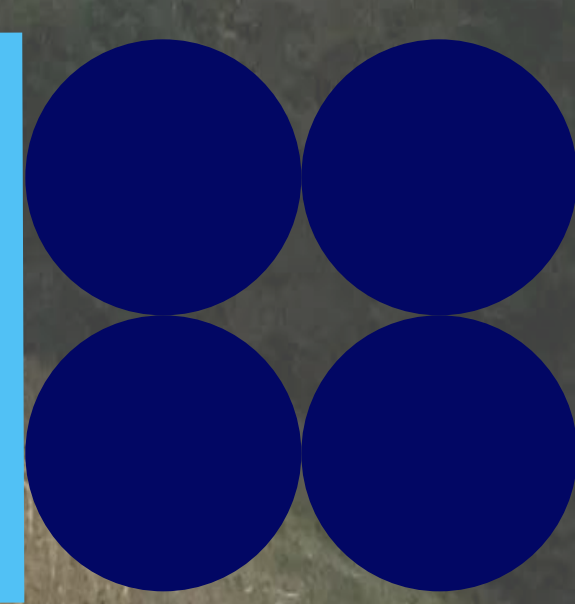
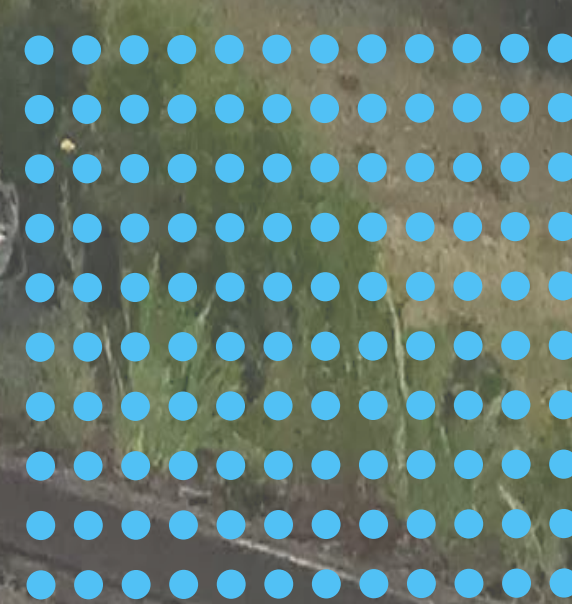
12

Priority topics addressed

15

Projects have community/patient advisory groups

[More details in Projects Appendix](#)



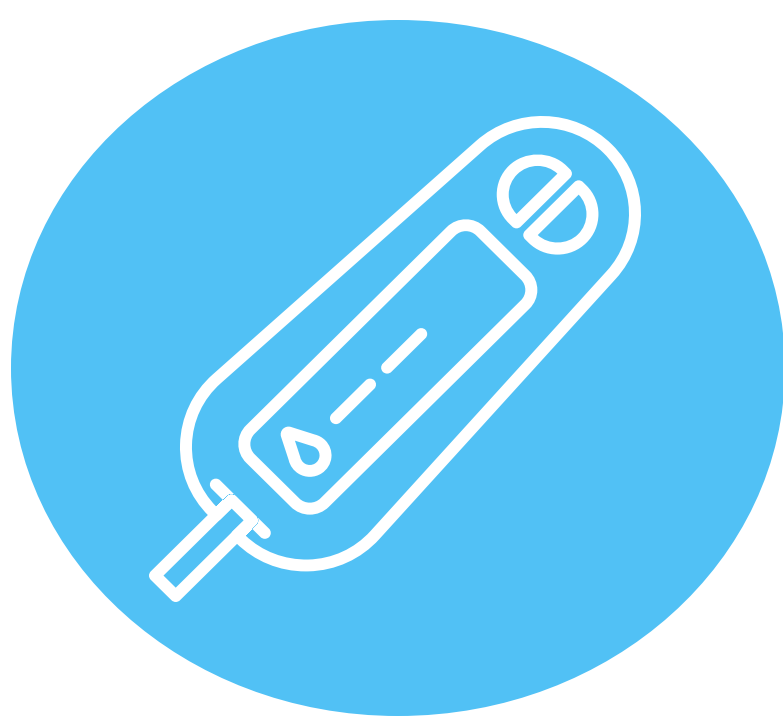


# Projects & Priorities Addressed

Priority topics came from recent years' SNOCAP Convocation priority topics conversations. Look for these icons throughout the report to find where these topics are being addressed within our work.



*Immunization  
Refusal  
Pages: 13, 22, 28, 31*



*Diabetes  
Pages: 13, 19, 20, 21,  
24, 26, 27, 28, 29*



*Health Equity  
Pages: 25, 30*



*Social Isolation &  
Loneliness  
Pages: 13, 23, 27*



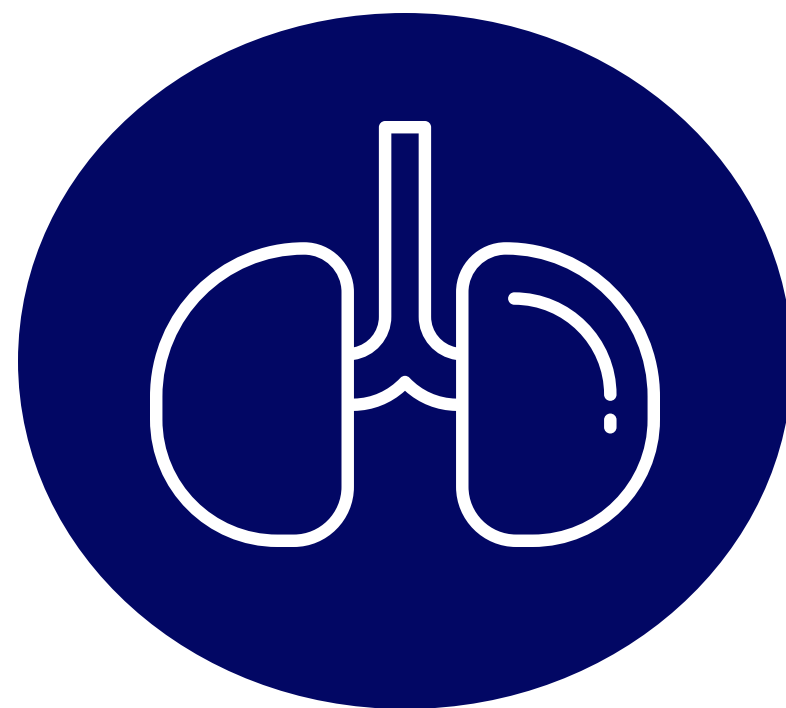
*Alcohol & Drug  
Misuse Interventions  
Pages: 13, 21, 25, 26,  
27, 32*



*Pediatric  
Mental Health  
Pages: 13, 25, 29, 30*



*Dementia  
Pages: 15, 21*



*COPD  
Pages: 23, 30, 31, 32*



*Primary Care  
Staff Burnout  
Page: 19*



*Elderly Health  
Pages: 15, 19*



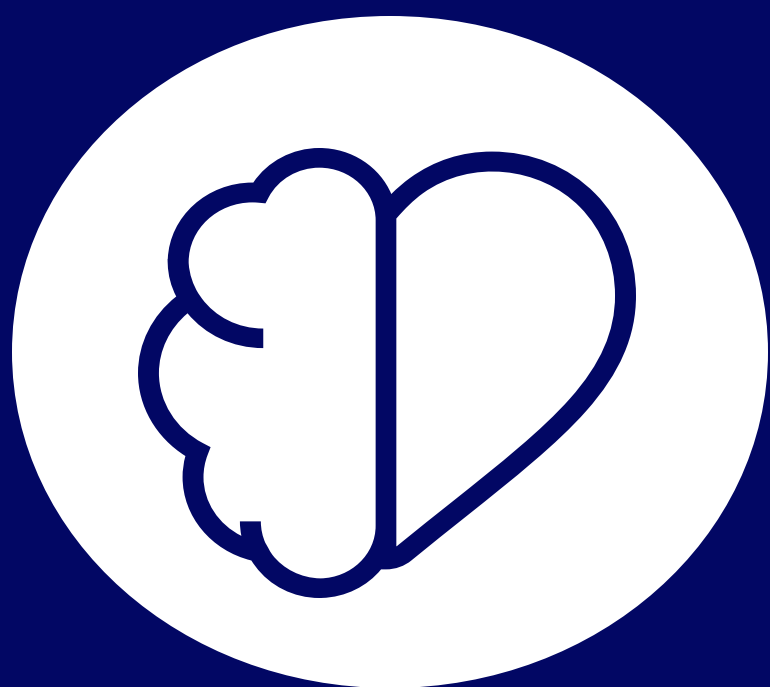
*Affordable/High-  
Quality Childcare  
Page: 20*



*Substance Abuse/Mental  
Health Overlap  
Pages: 15, 24*

## TOP 3 PRIORITY TOPICS OF INTEREST

identified during December 2021 COVID-19 Practice Survey #11



*Addressing Mental &  
Emotional Health*



*Social Determinants  
of Health*



*Care Collaboration &  
Care Management*



# Project Partner Perspectives

## What is it like to participate in a PBRN project?

We spoke with Rhia, a care coordinator at St. Mary's Family Medicine practice in Grand Junction, Colorado, who is involved in PEACHnet's "Increasing Understanding of Food Insecurity (IUFI)" Project to learn about her experience.

She found her work with the project very eye-opening and interesting. During the project, Rhia had the opportunity to **collaborate widely**, where she was able to learn about the many facets food insecurity including who is affected and what resources are available. Through these learning experiences, Rhia and her clinic were able to **identify and address gaps in resource information**. Additionally, the issue of food insecurity was brought to the forefront of the practice's attention, helping them to become **more food-aware and sensitive** in addressing the issue of food insecurity.

Overall, by participating in this PBRN project, Rhia, her practice, and the surrounding community reaped large benefits and made changes for the better.

## How is the SPUR project valuable to suicide prevention work?

Some of the major contributions of this project that were mentioned included:

- More outreach to survivors
- Emphasis on upstream methods
- Increase in the prevalence of conversations about mental health
- More opportunities and spaces for connection, collaboration, and information sharing
- Highlights the importance of whole patient treatment considerations

Based on contributions by Erica Kitzman and Liz Bell.

## How has HOMER helped your care team?

Hear from Dr. Karen Smith on how her collaboration with HOMER helped her to save a patient's life: <https://vimeo.com/675339373>

## The CAPTURE Study is one of my favorite HPRN Studies!

“Our patients loved that they could participate in research with others around the country - right here in our town. They have lost friends and family with COPD and want to help.”

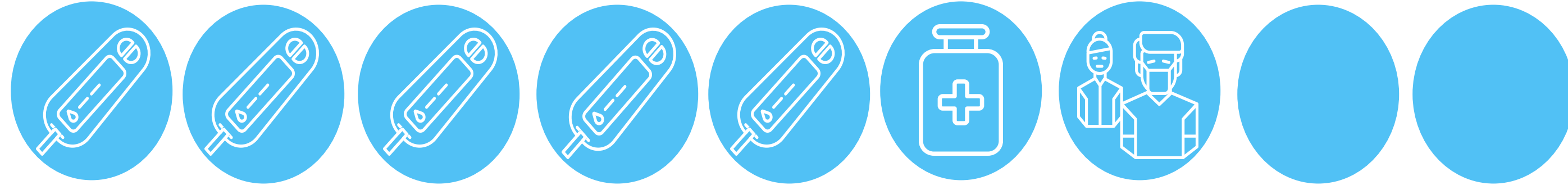
- Teri Mekelburg, RN



# Presentation Summary

25 presentations at 9 different conferences

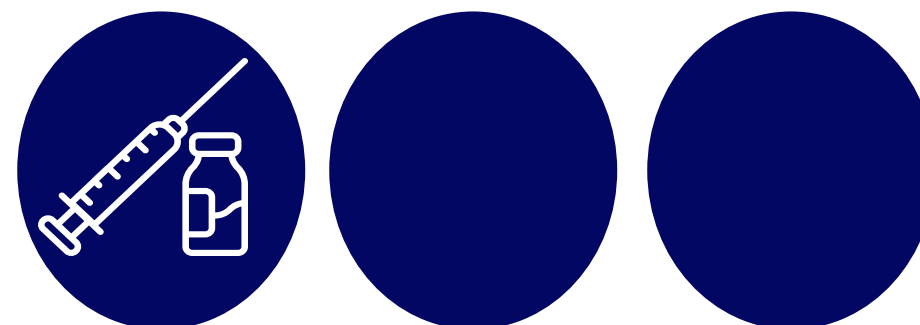
*9 Presentations at the November 2021 NAPCRG Annual Meeting*



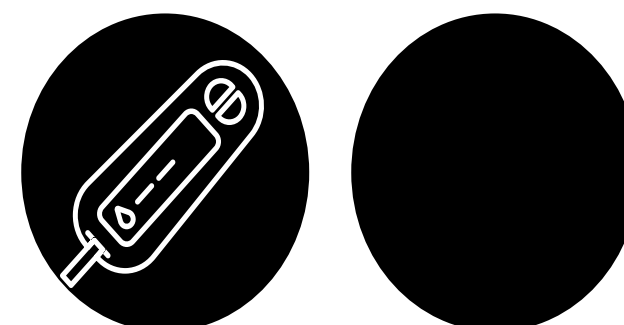
*6 Presentations at the June 2021 NAPCRG PBRN Conference*



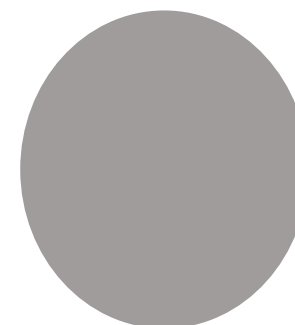
*3 Presentations at the Pediatric Academic Societies Conference*



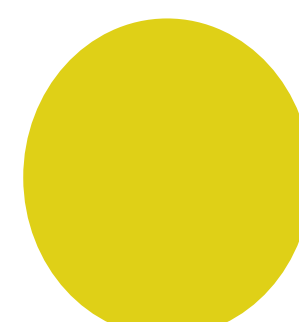
*2 Presentations at the Colorado Association of Family Medicine Residencies' Rocky Mountain Research Forum*



*1 Presentations at the Power of Rural Conference*



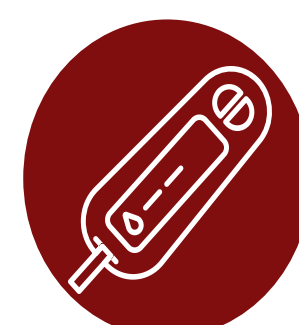
*1 Presentation at the Colorado Academy of Family Physicians' Annual Summit*



*1 Presentation at Suicide Prevention-Unified Research (SPUR)*



*1 Presentation American Diabetes Association 81st Scientific Sessions*



*1 Presentation at the American Society of Addiction Medicine Annual Conference*



Each icon represents a previously-mentioned priority topic.

Dots without an icon are other works not directly tied to priority topics.

[More details on Presentation in Appendix](#)



# Publication Summary

13

PEER-  
REVIEWED  
PUBLICATIONS

12

DIFFERENT  
JOURNALS  
PUBLISHED OUR  
WORK

2

PAPERS WITH  
PATIENTS  
OR COMMUNITY  
MEMBERS AS AUTHORS

104

OVERALL  
ONLINE  
IMPRESSIONS\*

\*Impressions obtained via Altmetrics.  
Includes: reads, news shares, tweets, and  
citations.

[More details on Publications in Appendix](#)



# Monthly Meeting Consultations

We invite investigators to join monthly SNOCAP meetings to discuss proposal ideas and projects. We encourage consultations to happen at the beginning of a partnership, or before a grant is submitted for review.

## FEBRUARY

**University of Colorado, SOM - Department of Family Medicine.**  
**Topic:** Addressing Mental Health and Substance Use Disorders in Primary Care with Integrated Behavioral Health Models Through Practice and Training



## APRIL

**Central Colorado Area Health Education Center (CCAHEC)**  
**Topic:** The "All of Us" Research Program: Creation of a Nation-Wide Health Database.

## DECEMBER

**University of Michigan, SOM - Department of Family Medicine**  
**Topic:** Chronic Illness and Contraception Use.



## MAY

**University of Colorado, SOM - Department of Family Medicine.**  
**Topic:** Vulnerability Index-Quality of Life Risk Stratification.

**University of Colorado, School of Medicine - Department of Family Medicine.**  
**Topic:** Community Engagement around COVID-19 Vaccination.

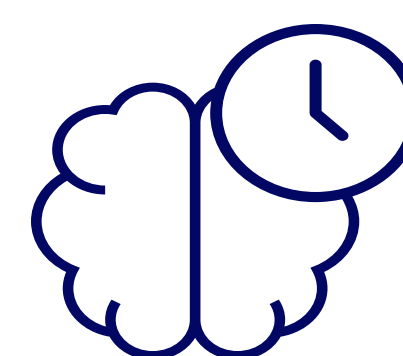
## SEPTEMBER

**University of Colorado, SOM - Division of Geriatric Medicine**  
**Topic:** Advance Care Planning - Pilot Project with MetaLARC PBRNs.



## AUGUST

**University of Colorado, SOM - Division of Geriatric Medicine**  
**Topic:** Creating usable tools for use with caregivers of those living with dementia.



"The connections I made with practices by presenting at a SNOCAP meeting directly allowed me to conduct data collection with a more geographically diverse set of practices than those with which I'd already connected."

- Tristen Hall, February 2020 Presenter



# Featured in the News

## The New "CEAL" Research Project

Donald Nease, MD  
CU Dept of Family Medicine  
<https://bit.ly/3lFuTKU>

## Regulation Change Could Help Addiction Treatment In The West

Donald Nease, MD  
KUNM  
<https://bit.ly/3lHQAKd>

## Increasing Access to Clinical Trials

Donald Nease, MD  
CU Medicine Today  
<https://bit.ly/3dtBoMl>

## A Change In Rules May Assist Habit Therapy Within The West

Donald Nease, MD  
Addiction News Now  
<https://bit.ly/3KKmDUF>

## Harnessing community voices to bolster COVID-19 vaccinations

Sarah Brewer, MD  
CU ACCORDS  
<https://bit.ly/3AODj9f>

## Schools Are Dropping Mask Requirements, But A New CDC Study Suggests They Shouldn't

Sean O'Leary, MD, MPH, FAAP  
NPR  
<https://n.pr/335YKFT>



Walsh Medical Clinic's Clinic Information Board

## Technology conference an opportunity for primary care to learn the latest about CGM and other diabetes technologies!

Tamara Oser, MD  
Association of Diabetes Care & Education Specialist  
<https://bit.ly/3g26QTa>

## Peer Support: The Missing Link?

Tamara Oser, MD  
Association of Diabetes Care & Education Specialist  
<https://bit.ly/3g0YFqa>

## Many Kids Have Missed Routine Vaccines, Worrying Doctors As School Starts

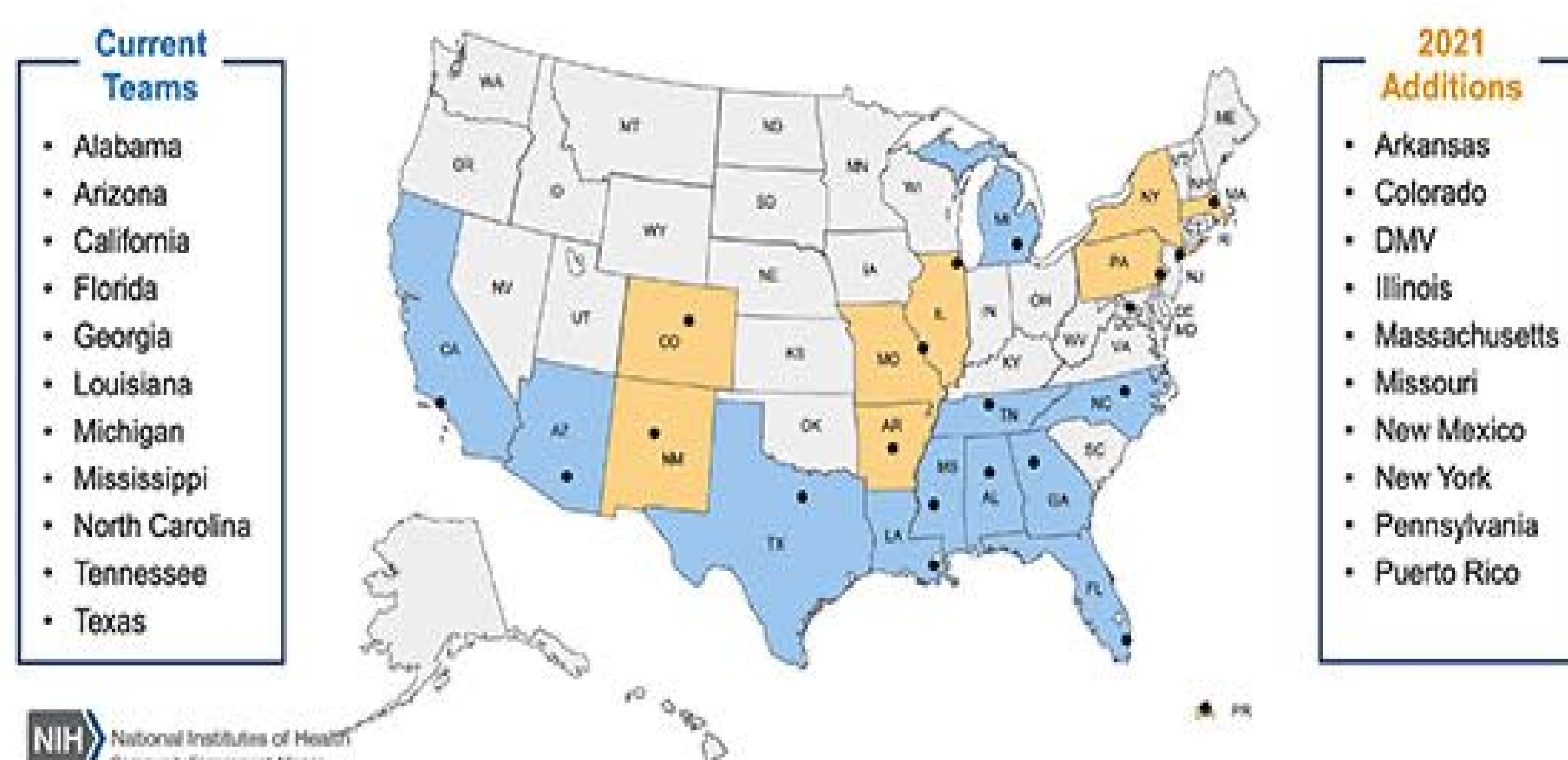
Sean O'Leary, MD, MPH, FAAP  
NPR  
<https://n.pr/3prZfS6>

## Children Now Account For 22% Of New U.S. COVID Cases. Why Is That?

Sean O'Leary, MD, MPH, FAAP  
NPR  
<https://n.pr/3lFvVXl>

### CEAL Teams

CEAL initially supported research teams in 11 states to focus on urgent community-engaged research and outreach focused on COVID-19 awareness and education among communities hardest hit by the pandemic. In April 2021, CEAL welcomed **10 additional teams** to the Alliance.





# Patient & Community Advisory Groups



Since March 2019, the CaReNet Patient Partners Research Group (PPRC) group has been interested in learning about dementia and Alzheimer's disease after having conversations about how that topic had been arising in many of their personal lives. The group began meeting with experts in this field to learn more and see how they could "plug in" to upcoming work and projects.

In April 2021, the PPRC was approached by Dr. Hillary Lum to engage in a proposal she was writing about preferences related to of dementia health IT tools in outpatient workflows and to conduct work related to dementia care partner intervention through the patient portal.

The project was selected for funding in July 2021, and work on this project and with the PPRC officially began in September 2021.



Check out the SNOCAP Advisory Groups website to learn more and to read more about the history of patient and community advisory groups in SNOCAP PBRNs: <https://bit.ly/3vX0Fc7>

## What is it like to participate in a PBRN Community Advisory Board?

We spoke with Kate, the Executive Director of SWCAHEC, who is also a Community Advisory Board (CAB) member for PEACHnet, about her role and experience working with a PBRN.

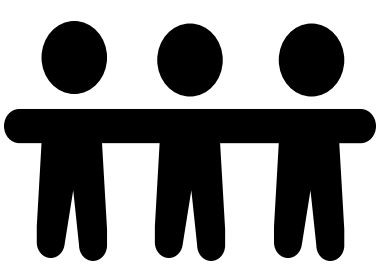
Kate describes her work with PEACHnet as a “conduit to the community,” where she is able to help advise and facilitate trusting relationships between researchers and the community, while also highlighting the role of research in finding the best information and programming to provide the best care for communities. She has found that in her work with PEACHnet, the community-informed research projects have been some of the most effective, as they use what community already knows and builds on it in order to create innovative programming and initiate meaningful conversations. Kate finds a lot of pride in the way that her work with PEACHnet helps researchers to truly listen to the communities they are serving.

Overall, Kate finds tremendous value in her relationship with PEACHnet and the role she serves on their CAB.





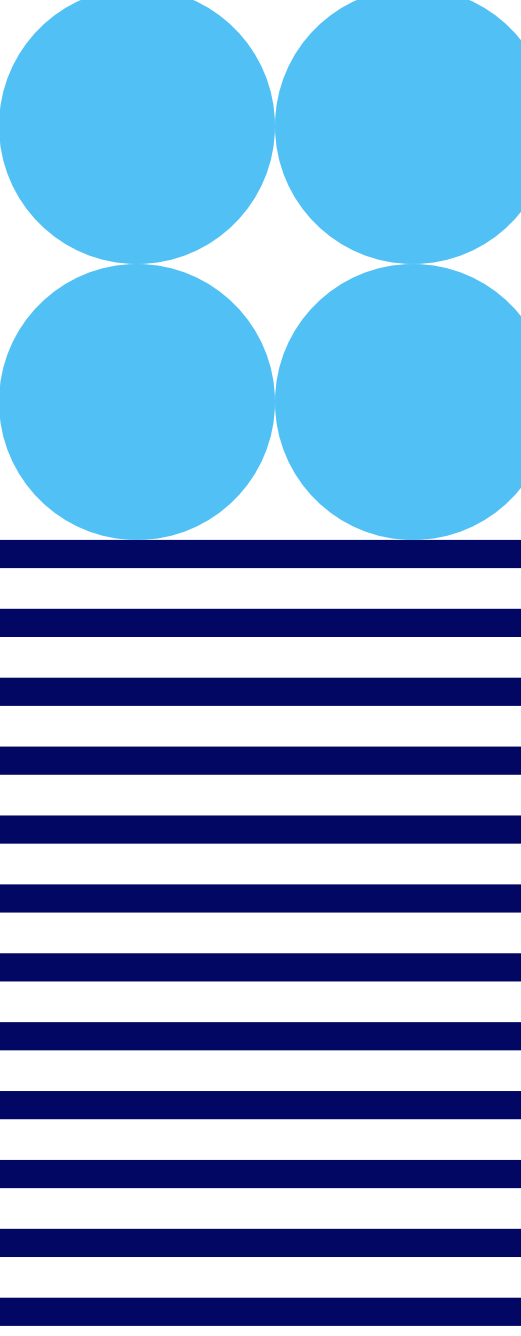
# Appendices



Icon represents patient  
or community advisor  
engagement



# Projects Appendix

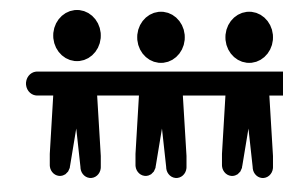


## SNOCAP

### Advance Care Planning



#### Advance Care Planning (ACP) in Primary Care



**Principal Investigator:** Dave Nowels (local PI)

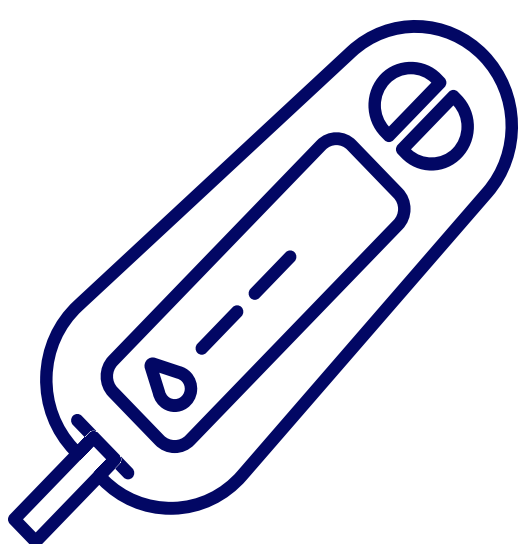
**Other Key Personnel:** D. Nease, M. Warman, C. Halliwell, T. Bogdewiecz

**Funder:** PCORI, 2019- 2022

**Funding Amount:** \$598,726

**Project Summary:** This project will test use of Serious Illness Care Program (SICP) for completion of advance care planning in appropriate older adults. SICP will be implemented in practices recruited through the PBRN, and the practices will be randomly assigned to a provider arm or an interdisciplinary care team arm. Entering follow-up phase to track patients.

### Bionic Pancreas System



#### Comparing Safety and Efficacy of a Closed-Loop Bionic Pancreas System when Deployed by Community-Based Primary Care Physicians Versus Academic Endocrinologists

**Principal Investigator:** Sean and Tamara Oser

**Other Key Personnel:** A. Nederveld

**Funder:** The Leona M. and Harry B. Helmsley Charitable Trust

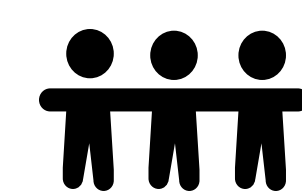
**Funding Amount:** \$1,609,966

**Project Summary:** This is a study assessing the feasibility of using the insulin-only configuration of the iLet bionic pancreas with initiation in pump-naïve people with type 1 diabetes in a primary care practice with either in-person training and follow-up (PC-IP) or with training and follow-up via telehealth (PC-TH). As a comparison, the iLet will be initiated by an academic endocrinology practice with either in-person training and follow-up (EN-IP) or with training and follow-up via telehealth (EN-TH).

### Burnout Card Study



#### Patient-perception of Primary Care Practice Burnout Card Study



**Principal Investigator:** Don Nease

**Other Key Personnel:** M. Fisher, E. Wright

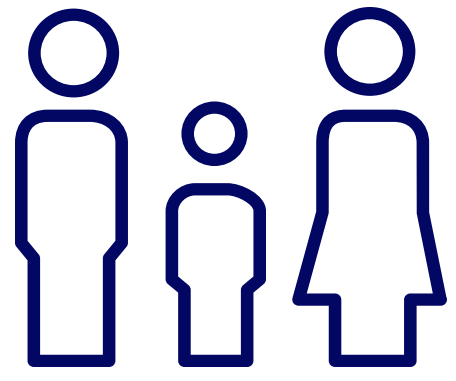
**Funder:** Internally Funded

**Funding Amount:** N/A

**Project Summary:** Card study created by CaReNet Patient Partners Research Council to address patient perceptions of burnout levels in their primary care healthcare team. Paired with a one-question burnout scale for the healthcare team members. Working with 8 practices state-wide.



## CASCADE



### A Community-based Assessment of Skin Care, Allergies, and Eczema

**Principal Investigator:** Don Nease (local PI)

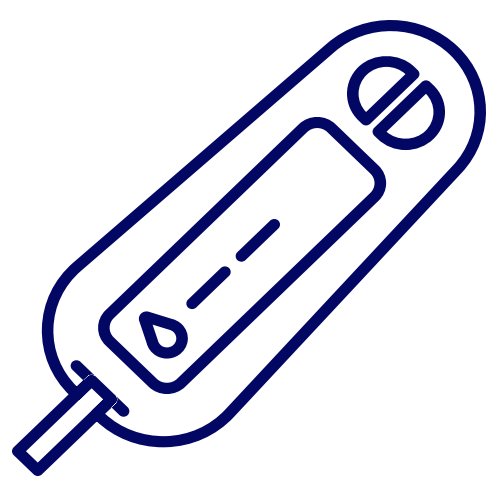
**Other Key Personnel:** M. Warman, C. Halliwell

**Funder:** NIAMS, 2018-2023

**Funding Amount:** \$292,473

**Project Summary:** A multi-PBRN trial comparing daily application of emollients to infants' skin to usual care for prevention of eczema.

## Continuous Glucose Monitoring



### Continuous Glucose Monitoring in Diabetes: Not Just for Endocrinologists--What Family Docs and Educators Need to Know

**Principal Investigator:** Sean and Tamara Oser

**Other Key Personnel:** D. Nease, J. Carroll, M. Dickinson

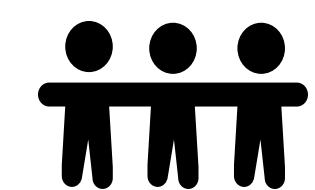
**Funder:** Hemsley, 2019-2021

**Funding Amount:** \$432,282

**Project Summary:** This is an explanatory sequential mixed methods study to assess Continuous Glucose Monitor (CGM) prescribing behaviors, barriers, and resource needs among primary care clinicians across the U.S. We conducted a cross-sectional web-based survey to identify characteristics associated with prescribing behaviors and openness to prescribing, and identified barriers and resources needed to support use of CGM in primary care. The survey was followed by semi-structured interviews with a subset of surveyed clinicians to understand barriers and facilitators to CGM prescription. Results informed the development of a free online module for clinicians (AAFP TIPS: Continuous Glucose Monitoring (CGM): Enhancing Diabetes Care, Workflows, Education, and Payment), and a subsequent study to evaluate three implementation strategies for integrating CGM into primary care practices.

## COISC3

### P50 Colorado Implementation Science Center in Cancer Control (COISC3)



**Principal Investigator:** Russell Glasgow

**Other Key Personnel:** L. Zittleman, T. Oser, C. Sutter, J. Ancona, J. Carroll, J. Holtrop

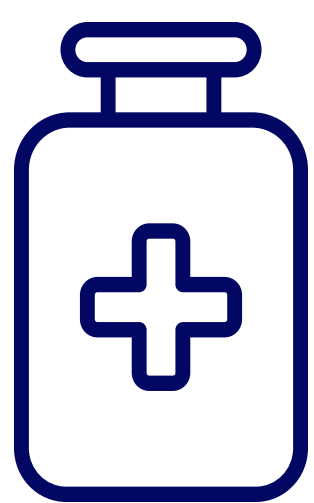
**Funder:** National Cancer Institute: Division of Cancer Control and Population Sciences; Adult and Child Consortium for Health Outcomes Research and Delivery Science (ACCORDS); Data to Patient Value (D2V); University of Colorado Cancer Center (UCCC). 2019-2024

**Funding Amount:** \$4,235,474

**Project Summary:** Colorado's Implementation Science Center theme is "*Pragmatic implementation science approaches to assess and enhance the value of cancer prevention and control in rural primary care.*" COISC3 applies and advances frameworks, pragmatic methods, and measures related to cost, benefits, and value that are rigorous, but also generalizable across rural primary care settings that are often struggling with low resources, and a high need population. These models and methods are used to guide selection and implementation of evidence-based programs for cancer prevention and control (CPC). The first focus of this group was on shared decision-making for lung cancer screening and smoking cessation in rural primary care settings in Colorado. Additionally, Administrative and Research Cores partnered with SNOCAP members to create a national survey to gain perspectives on both the prioritization of cancer prevention and control activities and the feasibility and impact of making improvements to each activity. Results are being summarized will soon be reported back.



# HOMER



## Home vs. Office Medication Effectiveness Research (HOMER)

**Co-Principal Investigators:** Linda Zittleman and Don Nease

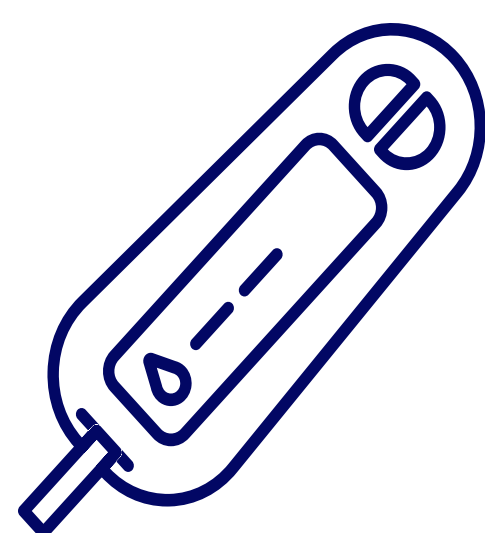
**Other Key Personnel:** M. Dickinson, B. Kwan, D. Fernald, J. Westfall

**Funder:** PCORI, 2020-2023

**Funding Amount:** \$4,768,301

**Project Summary:** Medication assisted treatment for opioid use disorder with buprenorphine begins with a step call induction. For buprenorphine to be effective and to avoid serious side effects, the person must be in active withdrawal. Induction can occur unobserved at home, observed at the office, or observed via telehealth. HOMER compares long-term treatment outcomes across induction methods and will inform evidence-based guidelines.

# Invested in Diabetes



## Invested in Diabetes

**Principal Investigator:** Bethany Kwan and Jeanette Waxmonsky

**Other Key Personnel:** M. Dickinson, R. Glasgow, D. Nease, J. Holtrop, M. Gritz, N. Ritchie, Sajatovic

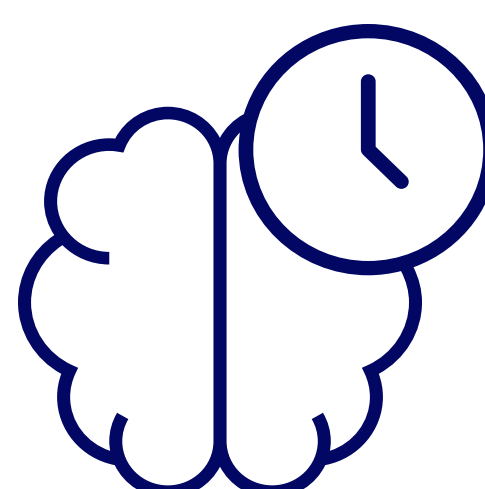
**Funder:** PCORI, 2017-2023

**Funding Amount:** \$4,760,078

**Project Summary:** This study compares the effectiveness of two Shared Medical Appointment approaches using the Targeted Training for Illness Management (TTIM) curriculum. Standardized SMAs are led by a health educator with a set order of TTIM topics. Patient-driven SMAs are delivered collaboratively by a multidisciplinary care team (health educator, medical provider, behavioral health provider, and a peer mentor); patients select the order and emphasis on TTIM topics.

# CaReNet

# Memory Tech



## Extraordinary Partners in Dementia: UCHealth Capacity for Pragmatic Interventions

**Principal Investigator:** Hillary Lum

**Other Key Personnel:** M. Fisher, D. Nease, S. Holden, J. Cassidy, E. Romeo

**Funder:** NIA Impact Collaboratory

**Funding Amount:** \$124,000 (sub-award)

**Project Summary:** Establish a Dementia Partners Council to provide ongoing input from patient and care partners' perspectives. Together, they will accomplish three Partnering Goals: 1) Understand Persons Living With Dementia (PLWD) and care partner perspectives on dementia health IT tools, focusing on underserved populations; 2) Assess clinician preferences related to implementation and sustainability of dementia health IT tools in outpatient workflows; and 3) Plan for dementia health IT real-world clinical trials through building electronic health record capacity. The plan is guided by values of: focusing on meaningful outcomes to PLWD and care partners, emphasis on equity through cultural awareness and reach to underserved communities, leveraging interprofessional collaborations, and use of health informatics tools.



## Disparities in Rural Adolescent Vaccination



### Using Boot Camp Translation to Address Rural Disparities in Adolescent Vaccination

**Principal Investigator:** Sean O’Leary, previously Amanda Dempsey

**Other Key Personnel:** S. Brewer, J. Cataldi, A. Nederveld, K. Suresh, A. Furniss, C. Perreira, A. Skenadore, and B. Mosley

**Funder:** CDC

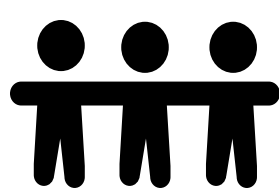
**Funding Amount:** \$1,044,739

**Project Summary:** We have assessed reasons for underlying disparities in vaccination among rural adolescents and implemented a community-engaged research process, called Boot Camp Translation, that has resulted in the development of effective strategies, products and implementation plans to help increase adolescent vaccination in rural Western Colorado.

## HPV BCT



### Engaging practices and communities in the development of interventions to promote HPV vaccine uptake



**Principal Investigator:** Sean O’Leary

**Other Key Personnel:** S. Brewer, M. Simpson, J. Rice, A. Skenadore, B. Mosley

**Funder:** NIAID, 2020-2022

**Funding Amount:** \$372,034

**Project Summary:** The overarching goal of this project is to implement Boot Camp Translation (BCT) methodology to translate the guidelines and evidence for human papillomavirus (HPV) vaccine into a practice and provider level intervention designed to improve its acceptability and uptake.

## MI4MI



### Motivational Interviewing for Maternal Immunizations (MI4MI)

**Principal Investigator:** Sean O’Leary

**Other Key Personnel:** S. Brewer, J. Cataldi, M. Fisher, R. Glasgow

**Funder:** NIAID, 2019-2022

**Funding Amount:** \$436,589

**Project Summary:** This study will train obstetrician-gynecologists (ob-gyns) in motivational interviewing techniques to see if these techniques can be adapted to the ob-gyn setting to improve communication about and immunization rates for influenza and Tdap among pregnant patients.

## PIVOT with MI



### Presumptively Initiating Vaccines and Optimizing Talk With Motivational Interviewing (PIVOT With MI)

**Principal Investigator:** Sean O’Leary

**Other Key Personnel:** M. Dickinson, A. Dempsey, K. Garrett, D. Opel, C. Zhou, J. Robinson, B. Pahud

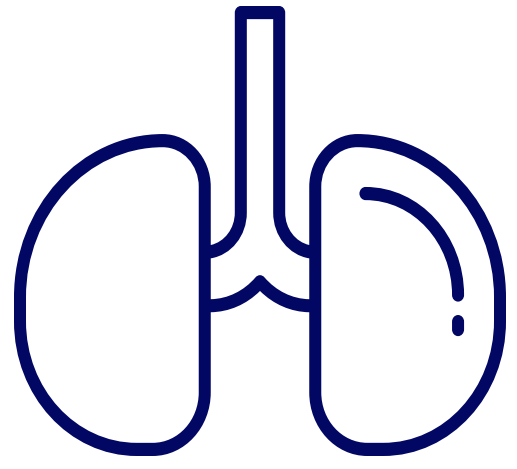
**Funder:** Eunice Kennedy Shriver National Institute of Child Health and Development at the US National Institutes of Health, 2019-2023

**Funding Amount:** \$3,096,973

**Project Summary:** The overall goal of this project is to determine whether a novel and innovative provider communication strategy is effective in improving vaccine acceptance among vaccine-hesitant parents (VHPs) and visit experience among VHPs and their health care providers.



## CAPTURE



### COPD Assessment in Primary Care to Identify Undiagnosed Respiratory Disease and Exacerbation Risk (CAPTURE)

**Principal Investigator:** Linda Zittleman (local PI)

**Other Key Personnel:** C. Sutter, J. Ancona

**Funder:** National Heart, Lung and Blood Institute of the National Institutes of Health, 2017-2022

**Funding Amount:** \$544,872

**Project Summary:** A prospective, multi-center, cluster randomized clinical trial to define the ability of the CAPTURE Tool (a simple 5-item questionnaire plus peak expiratory flow) to accurately identify previously unrecognized COPD symptoms in patients that may be appropriate for currently available treatments. If shown effective, the CAPTURE Tool will improve COPD diagnosis in primary care practices.

## COMET

### Changing Our Mental and Emotional Trajectory (COMET)

**Principal Investigator:** Linda Zittleman

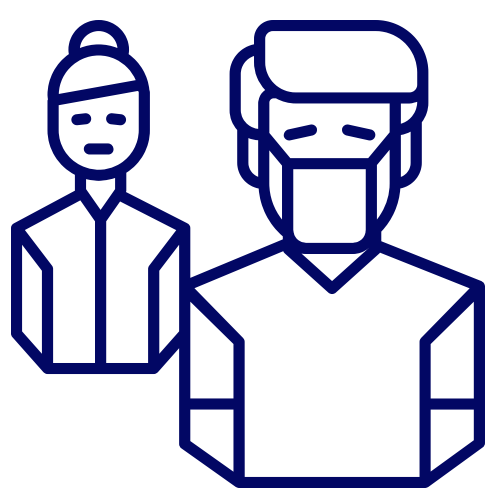
**Other Personnel:** M. Felzien, K. Curcija, C. Sutter, T. Oser

**Funder:** Internally Funded

**Funding Amount:** N/A

**Project Summary:** COMET aims to prevent mental and emotional health crises. COMET provides conversational questions and statements for community members to start potentially sensitive conversations with people who are in a “vulnerable space” and headed towards crisis to change to their trajectory crisis back towards a place of wellness. A critical factor in changing someone’s trajectory is another person who offering support, care, or treatment and causing a positive change. COMET includes two training programs: “COMET Community Training” for everyday community members and “COMET Train the Trainer” to train local people to conduct their own local COMET Community Trainings.

## TLC



### Tackling Loneliness w/Communities (T.L.C. Assessing and Translating Local Coping Strategies)

**Principal Investigator:** Rebecca Mullen and Maret Felzien

**Other Key Personnel:** K. Curcija

**Funder:** Colorado Clinical and Translational Sciences Institute’s Community Engagement Pilot Grant Awards, 2021-2022

**Funding Amount:** \$19,711

**Project Summary:** Loneliness is an established health priority with high prevalence and serious health consequences. Recent reports illustrate that loneliness is increasing due to the current COVID-19 pandemic and resultant social restrictions. Despite rural areas experiencing a high burden of loneliness, little is known about effective strategies to cope with loneliness in rural areas. As a continuation of the Tackling Loneliness with Communities Partnership Development grant, the current proposal builds on an existing community-academic partnership and seeks to understand successful coping strategies and compare results to standard evidence. The Community Advisory Council will use surveys and interviews to gather community-specific data about loneliness prevalence and successful coping strategies, compare this data to standard evidence, and generate best practices and guidelines for coping with loneliness in rural communities.



# SBIRT



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

**Principal Investigator:** Linda Zittleman

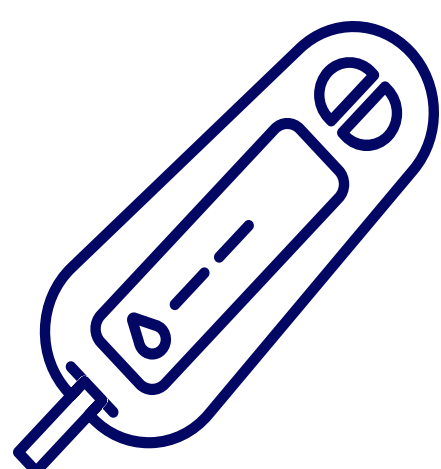
**Other Key Personnel:** T. Oser, C. Sutter, J. Ancona, J. Brooke, M. Martinez, K. Curcija

**Funder:** Via contract with Peer Assistance Services, Inc., 2017-2022

**Funding Amount:** \$963,000

**Project Summary:** Team-based training in SBIRT and facilitated implementation support for rural practice teams in eastern Colorado

# Rural Diabetes One Day



## Rural Diabetes One Day: Adapting and assessing the feasibility of a diabetes self-management education and support telehealth intervention for rural populations to reduce disparities in diabetes care

**Principal Investigator:** Tamara K. Oser

**Other Key Personnel:** L. Zittleman, K. Curcija, B. Kwan

**Funder:** National Institutes of Health/National Institute of Nursing Research

**Funding amount:** \$182,497

**Project Summary:** Diabetes is a chronic and progressive disease that impacts rural populations at higher rates when compared to their urban counterparts, and people with diabetes living in rural areas are less likely to reach optimal diabetes management. Diabetes self-management education and support (DSMES) is evidence-based and standard of care and has been shown to improve diabetes outcomes. Yet, DSMES is often not accessible to rural populations or culturally appropriate. This project uses Boot Camp Translation to adapt an established DSMES program (Diabetes One-Day) for use in rural communities (R-D1D) and conduct a pilot study to assess the implementation and effectiveness of R-D1D with two HPRN clinics. Results will inform the development of a larger study to assess effectiveness and support broad dissemination of the R-D1D to patients in need of DSMES in eastern Colorado and other rural areas.

# PEACHnet

# Addressing Food Insecurity

## Addressing Food Insecurity by Improving Referral Systems in Mesa County

**Principal Investigator:** Anne Nederveld

**Other Key Personnel:** J. Holtrop, E. Broaddus, M. Dickinson

**Funder:** Colorado Evaluation and Action Lab

**Funding Amount:** \$192,602

**Project Summary:** Colorado Evaluation and Action Lab-funded work, exploring ways to improve understandings of food insecurity and how to assist food insecure families, among education and medical practice staff.



## COTS



### Community Opioid Treatment Strategy (COTS) Boot Camp Translation (BCT) Partnership

**Key Personnel:** D. Nease, M. Fisher, J. Rollins, Mid Valley Family Practice, Roaring Fork Valley

Community COTS Participants

**Funder:** Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS)

**Summary:** Community-and practice-based team from the Roaring Fork Valley, working on a Boot Camp Translation about what works around stigma reduction and opioid treatment. One of the richest recent COTS efforts has been how to address stigma for people seeking treatment for opioid use disorder. The variety of opinions means that there are significant differences to overcome when deciding what approach needs our attention and what approach could make the greatest impact. The COTS team believes that a mix of local knowledge and topic expertise around stigma and the science of addiction will elucidate the best path forward.

## COVID Resource Study

### COVID Resource Study

**Principal Investigator:** Anne Nederveld

**Other Key Personnel (Colorado):** E. Broaddus, K. Duarte

**Funder:** Robert Wood Johnson Foundation through University of California San Francisco, 2020-2022

**Funding Amount:** \$14,468

**Project Summary:** Rural patient surveying re: COVID effects on health, well-being, security, and economic standing, including whether respondents had access to care.

## IMAGINE



### IMAGINE (Improving Messaging Around Gaps In Needs and rEferrals)

**Principal Investigator:** Anne Nederveld

**Other Key Personnel:** E. Broaddus

**Funder:** SIREN/the Robert Wood Johnson Foundation. 2020-2021

**Funding Amount:** \$149,979

**Project Summary:** This study aims to identify effective communication and messaging strategies that can increase patient interest in healthcare-based assistance with social needs. Researchers will explore reasons why patients accept or decline referrals for services and develop and test alternate messages and strategies using a community based participatory approach. The project will be carried out in three phases and will be implemented in two western Colorado primary care practices that currently use the Accountable Health Community (AHC) Health-Related Social Needs (HRSN) Screening Tool.

## SPUR



### SPUR: Suicide Prevention-Unified Research in Western Colorado

**Principal Investigator:** Anne Nederveld

**Other Key Personnel:** E. Broaddus

**Funder:** PCORI Eugene Washington award, 2021

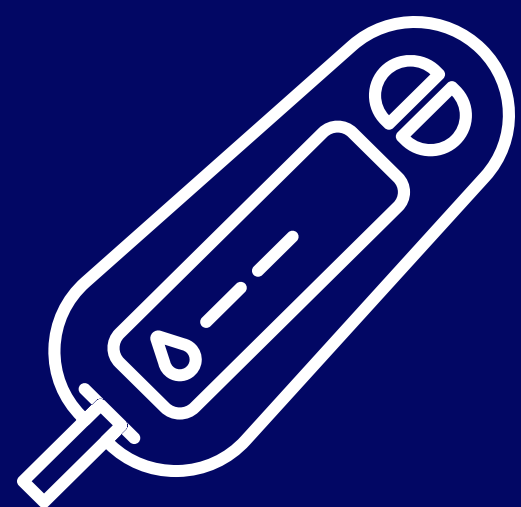
**Funding Amount:** \$99,995

**Project Summary:** PCORI Eugene Washington Engagement Award: Bringing partners together to discuss youth suicide prevention priority topic area.



# Presentation Appendix

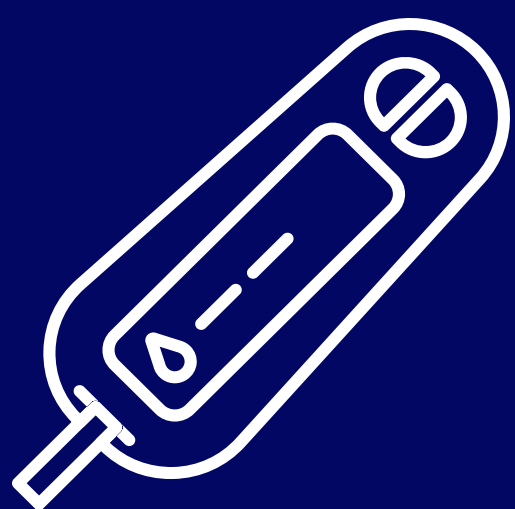
## NAPCRG PBRN Conference - June 2021



### **Relationship between Clinician Characteristics and Use of Continuous Glucose Monitoring in Primary Care**

**Presenters:** Meredith Warman

**Type of Presentation:** Oral



### **A Community-Engaged Pilot Clinical Trial for Diabetes Self-Management in a Rural Practice Based Research Network**

**Presenters:** Linda Zittleman, Kristen Curcija, Michelle Litchman, Juliana Simonetti, Julie Neuberger, Bethany Kwan, Tamara Oser

**Type of Presentation:** Poster



### **Engaging Community in Survey Design: Home vs Office vs Telehealth for Medication Enhanced Recovery (HOMER) Trial**

**Presenters:** Donald Nease, Bethany Kwan, Maret Felzien, Linda Zittleman

**Type of Presentation:** Oral

### **Increasing Awareness and Empathy for People Experiencing Food Insecurity in Western Colorado**

**Presenters:** Andrea L. Nederveld, Elena Broaddus, Kelsey Fife Duarte

**Type of Presentation:** Poster

### **Card Studies: What are they, how they're done, why they are important to Practice Based Research Networks and practices**

**Presenters:** Donald Nease, Mary Fisher, Elexia Wright

**Type of Presentation:** Oral



### **Utilizing Practice-Based Research Networks for Comparative Effectiveness Research on Treatment for Opioid Dependence**

**Presenters:** Linda Zittleman, Jack Westfall, Jen Carroll, Doug Fernald, Miriam Dickinson, Bethany Kwan, Ben Sofie, Donald Nease

**Type of Presentation:** Poster



# NAPCRG Annual Meeting - November 2021



## **Comparing Outcomes based on Home, Office, or Telehealth Induction for Opioid Use Treatment with Buprenorphine**

**Presenters:** Linda Zittleman, John Westfall, Doug Fernald, Miriam Dickinson, Bethany Kwan, Jen Carroll, Ben Sofie, Tristen Hall, Maret Felzien, Camille Hochheimer, Cory Lutgen, Donald Nease

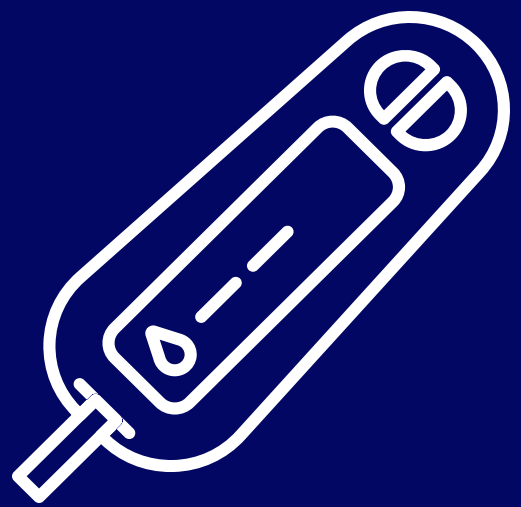
**Type of Presentation:** Poster



## **Continuous Glucose Monitoring for Primary Care Patients with Diabetes: Barriers, Facilitators, & Resources to Support Access (Pearls)**

**Presenters:** Meredith Warman, Sean Oser, Tristen Hall, Melissa Filippi, Brian Manning, Jennifer Carroll, Donald Nease, Tamara Oser

**Type of Presentation:** Oral



## **Relationship of Primary Care Clinician Characteristics with Continuous Glucose Monitoring Use and Confidence**

**Presenters:** Tristen Hall, L. Miriam Dickinson, Elisabeth Callen, Donald Nease, Jennifer Carroll, Tamara Oser, Meredith Warman, LeAnn Michaels, Sean Oser

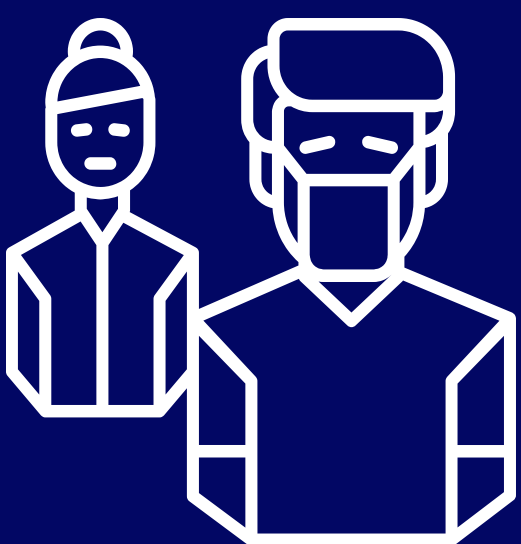
**Type of Presentation:** Oral



## **A Community-Engaged Pilot Clinical Trial for Diabetes Self-Management in a Rural Practice Based Research Network**

**Presenters:** Tamara Oser, Julie Neuberger, Brenda Cabrera, Marilee Johnson, Kelsey Huss, Linda Zittleman, Michelle Litchman, Kristen Curcija, Shawnecca Burke, Bethany Kwan, Juliana Simonetti

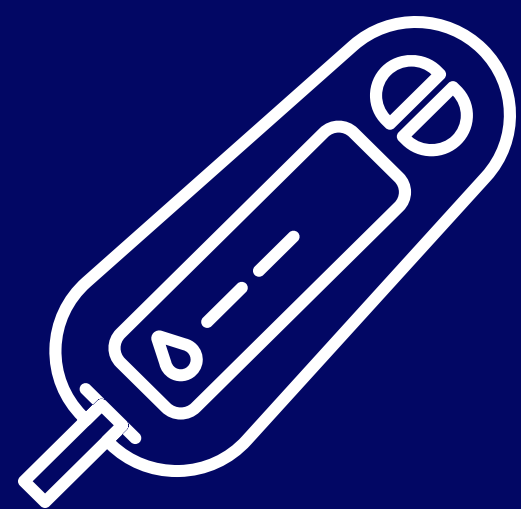
**Type of Presentation:** Poster



## **Tackling Loneliness in Communities through Community-generated Translational Research Questions**

**Presenters:** Rebecca Mullen, Linda Zittleman, Kristen Curcija, Tamara Oser, Maret Felzien

**Type of Presentation:** Poster



## **AAFP TIPS™: pilot evaluation of a new practice improvement module on continuous glucose monitoring**

**Presenters:** Sean Oser, Tamara Oser, Melissa Filippi, Angie Lanigan, Christina Hester, Jillian Alai, Tristen Hall, L. Miriam Dickinson

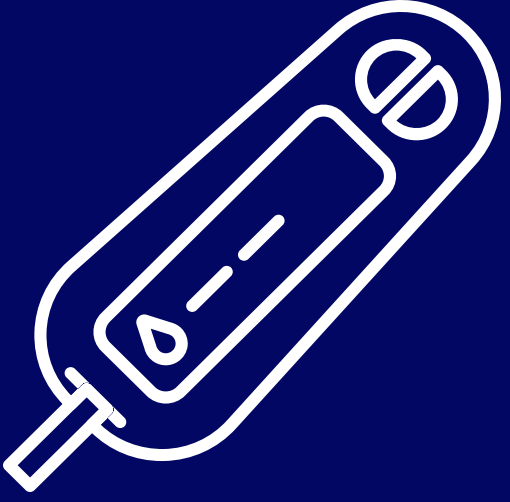
**Type of Presentation:** Poster



**Impact of Cognitive Impairment on Shared Decision Making for Cancer Screening and Prevention Activities in Rural Primary Care**

**Presenters:** Tamara Oser, MD; Hillary Lum, MD, PhD; Lauri Connelly; Jodi Summers Holtrop, PhD, MCHES NAPCRG Annual

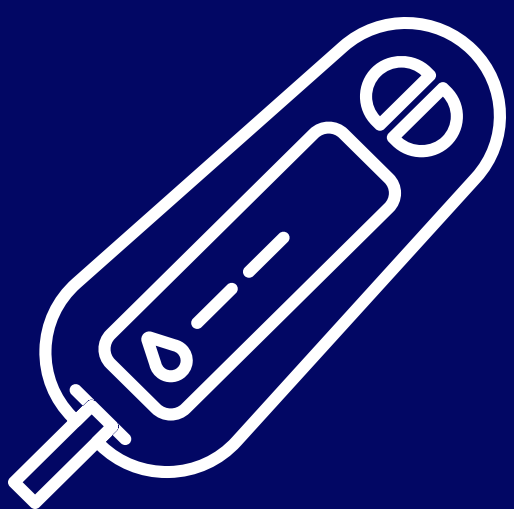
**Type of Presentation:** Poster



**Use of Continuous Glucose Monitoring and a structured lifestyle intervention in adults with newly diagnosed type 2 diabetes**

**Presenters:** Tamara Oser, Marilyn Stasinopoulos, Anthony McCall, Matthew Moncrief, Daniel Cox, Mark Cucuzzella

**Type of Presentation:** Poster



**Patient perspectives on diabetes shared medical appointments before, during, and after the COVID-19 pandemic**

**Presenters:** Dennis Gurfinkel, Andrea Nederveld, Julia Reedy, Jeanette Waxmonsky, Bethany Kwan, Jodi Summers Holtrop

**Type of Presentation:** Poster

## Pediatric Academic Societies 2021

**Panel: Late-Breaking COVID-19 Vaccine Progress and the 2021 Red Book**

**Presenters:** Sean O'Leary

**Type of Presentation:** Panel

**The 2021 American Academy of Pediatrics Clinical Practice Guideline for Febrile Infants 8-60 Days**

**Presenters:** Sean O'Leary, MD, MPH, FAAP

**Type of Presentation:** Oral



**Parental Vaccine Hesitancy and Risk of Pediatric Influenza Undervaccination in a Safety-Net Healthcare System**

**Presenters:** Sean O'Leary, MD, MPH, FAAP

**Type of Presentation:** Oral

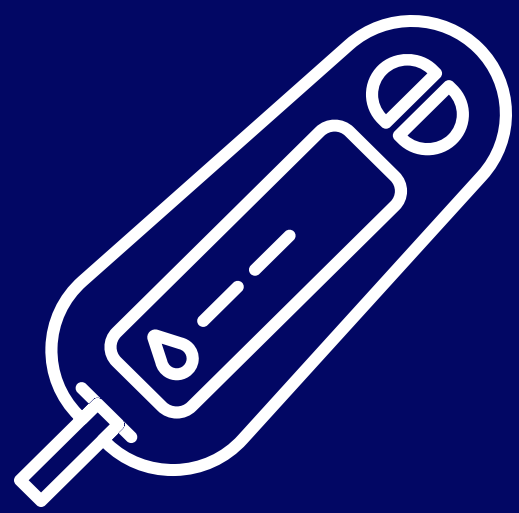
## Colorado Association of Family Medicine Residencies' Rocky Mountain Research Forum

**SNOCAP & Practice-Based Research Networks**

**Presenters:** Don Nease, Mary Fisher

**Type of Presentation:** Oral





**Community Engagement in Research Recruitment: Strategies Developed for a Diabetes Education and Support Intervention for Rural Communities**

**Presenters:** Burke S, Zittleman L, Curcija K, Litchman M, Cabrera B, Carpio B, Huss K, Johnson M, Rodriguez M, Stromberger J, Oser TK

**Type of Presentation:** Oral

## Power of Rural Conference

**Impacting Rural Health through Practice and Community Based Research from the Plains to the Peaks**

**Presenters:** Donald Nease

**Type of Presentation:** Oral

## Colorado Academy of Family Physicians' Annual Summit

**SNOCAP: Addressing the needs of Colorado practices and communities since 2004**

**Presenters:** Don Nease, Mary Fisher, Linda Zittleman, Elena Broaddus

**Type of Presentation:** Oral

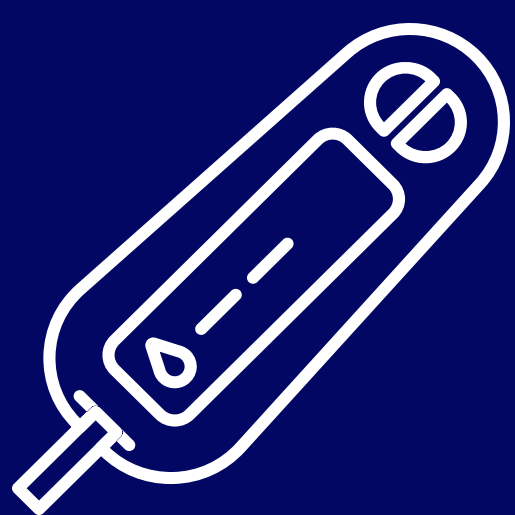
## Suicide Prevention-Unified Research (SPUR) Virtual Conference



**Suicide Prevention-Unified Research (SPUR)**

**Facilitators:** Andrea Nederveld and Elena Broaddus

## American Diabetes Association 81st Scientific Sessions



**Cultural Adaptation of a Diabetes Self-Management Education and Support Telehealth Intervention for Rural Colorado**

**Presenters:** Oser TK, Litchman ML, Kwan B, Neuberger J, Curcija K, Burke S, Zittleman LK, Simonetti JS.

**Type of Presentation:** Poster

## American Society of Addiction Medicine Annual Conference (Virtual):

**Increasing knowledge and capacity for MAT for OUD in rural Colorado.**

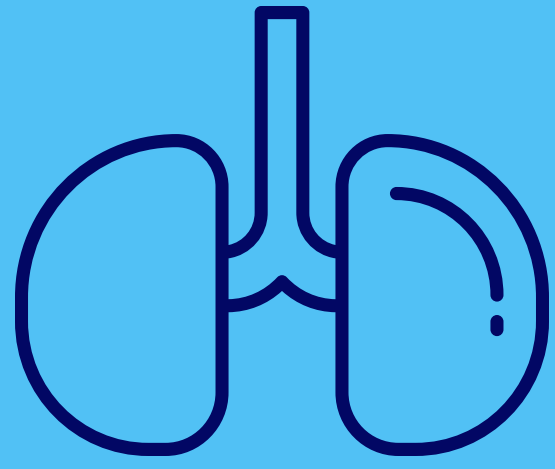
**Presenters:** Linda Zittleman, Kristen Curcija, Donald Nease, L Miriam Dickinson, John Thomas, Christin Sutter, Ashley Espinoza, Jack Westfall.

**Type of Presentation:** Poster



# Publications Appendix

**SNOCAP**



## **Challenges Faced by Rural Primary Care Providers When Caring for COPD Patients in the Western United States**

**Authors:** Fernando Diaz del Valle, Patricia B. Koff, Sung-Joon Min, Jonathan K. Zakrajsek, Linda Zittleman, Douglas H. Fernald, Andrea Nederveld, Donald E. Nease, Alexis R. Hunter, Eric J. Moody, Kay Miller Temple, Jenny L. Niblock, Chrysanne Grund, Tamara K. Oser, K. Allen Greiner, and R. William Vandivier

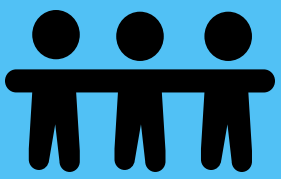
**Journal Info:** Chronic Obstr Pulm Dis. 2021; 8(3): 336–349

## **Family Medicine Research Capacity in the USA**

**Authors:** Rebecca Mullen, Amanda Weidner, Winston Liaw, Arch G Mainous, III, Christina M Hester, Felicity Goodyear-Smith, Donald Nease, David Schneider, Bernard Ewigman

**Journal Info:** Family Practice, Volume 38, Issue 2, April 2021

## **It should not require a pandemic to make community engagement in research leadership essential, not optional**

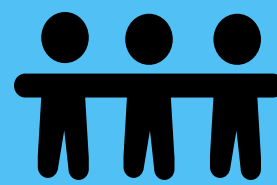


**Authors:** Kevin Grumbach, Linda B. Cottler, Jen Brown, Monique LeSarre, Ricardo F. Gonzalez-Fisher, Carla D. Williams, J. Lloyd Michener, Donald E. Nease, Darius Tandon, Deepthi S. Varma, and Milton Eder

**Journal Info:** J Patient Cent Res Rev. 2021 Summer; 8(3): 272–276



## **UPSTREAM! Together Evaluation Results from Community Efforts to Prevent Mental, Emotional, and Behavioral Health Problems**



**Authors:** Douglas H.Fernald, Linda Zittleman, Emma C. Gilchrist, Lina I.Brou, Lina I.Brou, Linda Niebauer, Charlotte Ledonne, Christin Sutter, Maret Felzien, John M.Westfall, Larry A.Green

**Journal Info:** Evaluation and Program Planning 2021;89(1)



## **2021 PBRN Conference: "Embracing Diversity, Equity, and Inclusion"**

**Authors:** Donald Nease Jr. and Michelle Greiver

**Journal Info:** The Annals of Family Medicine September 2021, 19 (5) 470-471



## A Taxonomy for External Support for Practice Transformation

**Authors:** Leif I. Solberg, Anton Kuzel, Michael L. Parchman, Donna R. Shelley, W. Perry Dickinson, Theresa L. Walunas, Ann M. Nguyen, Lyle J. Fagnan, Samuel Cykert, Deborah J. Cohen, Bijal A. Balasubramanian, Douglas Fernald, Leah Gordon, Abel Kho, Alex Krist, William Miller, Carolyn Berry, Daniel Duffy and Zsolt Nagykaldi

**Journal Info:** The Journal of the American Board of Family Medicine 2021; 34(1):32-39

## Review of transforming teamwork: Cultivating collaborative cultures

**Authors:** Douglas Fernald

**Journal Info:** Fam Syst Health. 2021 Jun;39(2):401-403. DOI: 10.1037/fsh0000603

## Why Family Medicine Program Directors Leave Their Position

**Authors:** Douglas Fernald, Christina M. Hester, and Steven R. Brown

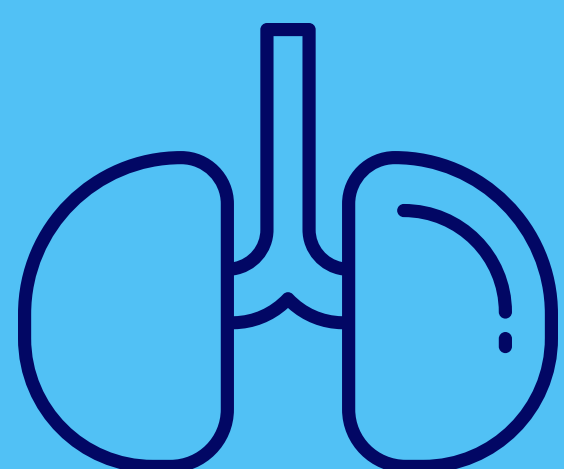
**Journal Info:** Fam Med. 2021;53(5):347-354. DOI: 10.22454/FamMed.2021.746153



## Racial/Ethnic Disparities in Maternal Vaccine Knowledge, Attitudes, and Intentions

**Authors:** Matthew Z. Dudley, Rupali J. Limaye, Daniel A. Salmon, Saad B. Omer, Sean T. O’Leary, Mallory K. Ellingson, Christine I. Spina, Sarah E. Brewer, Robert A. Bednarczyk, Fauzia Malik, Paula M. Frew, Allison T. Chamberlain

**Journal Info:** Public Health Rep. 2021 Jan 28;33354920974660

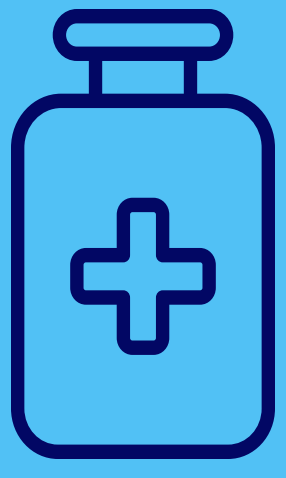


## COVID-19 Data from the Primary Care Population of the Capture Study

**Authors:** Emily White, Elizabeth Freheit, Barbara Yawn, Myawn Meilan Han, Fernando Martinez, Barry Make, David Mannino, Linda Walsh, Randall Brown, Cathie Spino, Susan Murray, Gretchen McCreary, Cara Pasquale, Brandon Holmes, Rowena Dolor, Min Joo, Linda Zittleman, Nancy Elder, Lyndee Knowx, Hazel Tapp, Catherine Meldrum, Elizabeth Peters, Stacey Anderson and Elisha Malanga

**Journal Info:** Chest 2021; 160(4):A1964-A1966

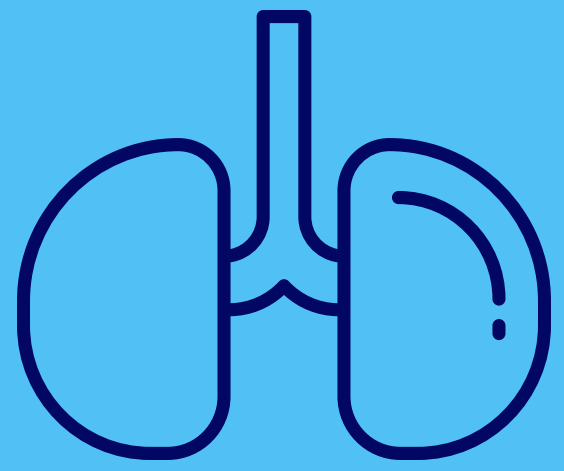




**The who, the what, and the how: A description of strategies and lessons learned to expand access to medications for opioid use disorder in rural America**

**Authors:** Evan S. Cole, Ellen DiDomenico , Sherri Green, Susan K. R. Heil, Tandra Hilliard, Sarah E. Mossburg, Andrew L. Sussman, Jack Warwick, John M. Westfall, Linda Zittleman, and Julie G. Salvador

**Journal Info:** Substance Abuse 2021; 42(6):1-7



**Protocol Summary of the COPD Assessment in Primary Care To Identify Undiagnosed Respiratory Disease and Exacerbation Risk (CAPTURE) Validation in Primary Care Study**

**Authors:** Barbara P. Yawn, Meilan Han, Barry M. Make, David Mannino, Randall W. Brown, Catherine Meldrum, Susan Murray, Cathie Spino, Jacqueline S. Bronicki, Nancy Leidy, Hazel Tapp, Rowena J. Dolor, Min Joo, Lyndee Knox, Linda Zittleman, Byron M. Thomashow, and Fernando J. Martinez

**Journal Info:** Chronic Obstr Pulm Dis. 2021 Jan;8(1):60-75.

**PEACHnet**

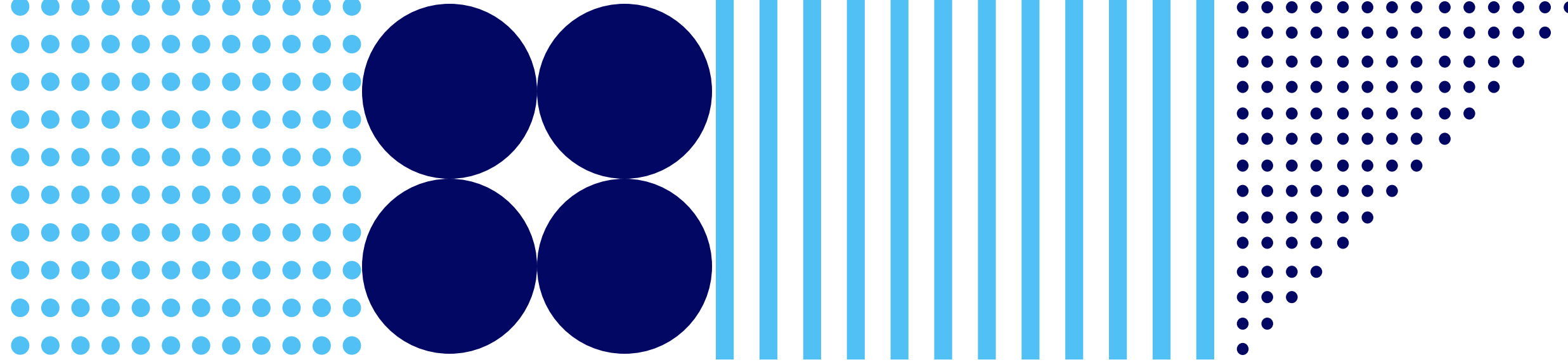
**The Joys and Challenges of Delivering Obesity Care: a Qualitative Study of US Primary Care Practices**

**Authors:** Andrea Nederveld, Phoutdavone Phimphasone-Brady , Lauri Connelly, Laurie Fitzpatrick, and Jodi Summers Holtrop

**Journal Info:** Journal of General Internal Medicine 36(6)



# Glossary



## Helpful Acronyms

### A

AAFP	American Academy of Family Physicians
ADA	American Diabetes Association
AHEC	Area Health Education Center
AHRQ (ârk)	Agency for Healthcare Research and Quality
AI	Appreciative Inquiry

### B

BCT	Boot Camp Translation
BIGHORN	Building Investigative practices for better Health Outcomes Research Network

### C

CAFP	Colorado Academy of Family Physicians
CaReNet	Colorado Research Network
CAB	Community Advisory Board
CAC	Community Advisory Council
CBPR	Community Based Participatory Research
CCTSI	Colorado Clinical and Translational Sciences Institute
CRC Screening	Screening Colorectal Cancer Screening
CME	Continuing Medical Education
COCONet	Colorado Children’s Outcomes Network
COMIRB (Cō’ mêrb)	Colorado Multiple Institutional Review Board

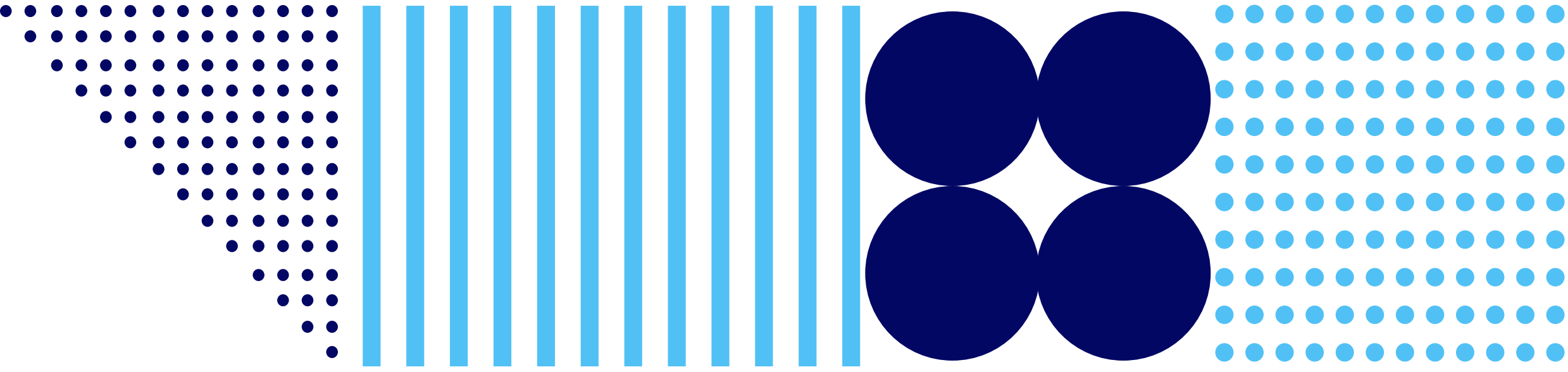
### D

DFM	Department of Family Medicine
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### I

IRB	Institutional Review Board
IT MATTTRs	Implementing Technology and Medication Assisted Treatment Team Training in Rural Colorado





## H

HIPAA	Health Insurance Portability and Accountability Act
HPRN	High Plains Research Network

## M

Meta-LARC	Meta-Network Learning and Research Center
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## N

NAPCRG (Năp' crăg)	North American Primary Care Research Group
NCI	National Cancer Institute
NHLBI	National Heart, Lung, and Blood Institute
NIH	National Institute of Health

## P

PAC	Patient Advisory Council
PACE	Patient and Clinician Engagement (NAPCRG group)
PCORI	Patient-Centered Outcomes Research Institute
PBRN	Partners Engaged in Actively Changing Healthcare
PEACHnet	Practice-based Research Network
PHI	Protected Health Information
PI	PI Principal Investigator
PRA	Professional Research Assistant

## R

RE-AIM	Reach, Efficacy/Effectiveness, Adoption, Implementation, Maintenance
RFA	Request for Application
RFP	Request for Proposal
RWJF	Robert Wood Johnson Foundation

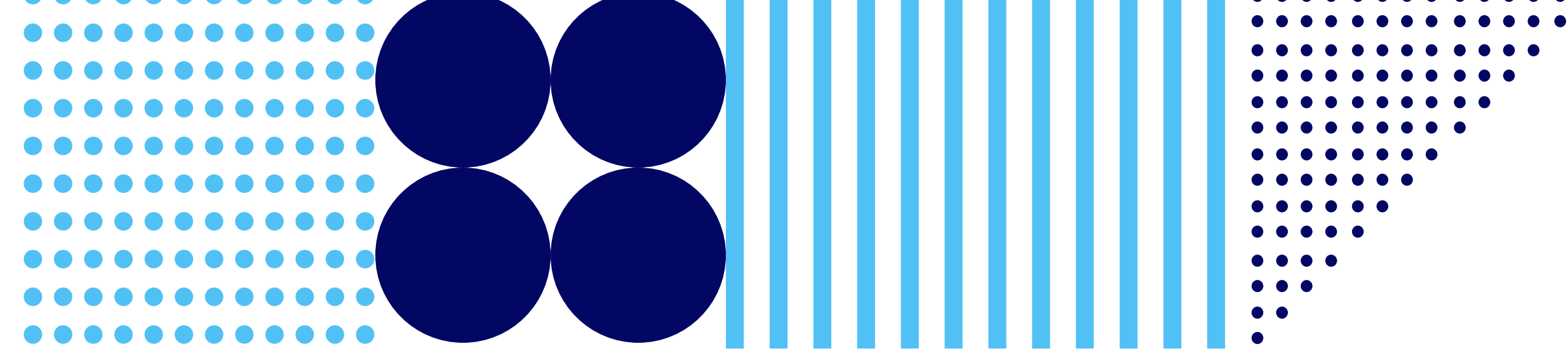
## S

SNOCAP	State Networks of Colorado Ambulatory Practices and Partners
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## U

UCH	University of Colorado Hospital
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## ***Definitions***

### **Principal Investigator**

The principal investigator is the person responsible for the conception and design of the study and the analysis and interpretation of the data. The principal investigator is identified early in the study design process.

### **Network Director**

Network Directors are appointed as described in the bylaws. All research is under the jurisdiction of the Director.

### **Primary Publication**

A primary publication is one that details the design, methods, or primary results of a SNOCAP study.

### **Secondary Publication**

A secondary publication is one that details a secondary aim of a SNOCAP study or a question developed and pursued by an investigator using SNOCAP resources; for example, data from a SNOCAP study. The principal investigator, or Director in the event the principal investigator is no longer involved with SNOCAP, must agree to the preparation of manuscripts that do not directly relate to the stated purposes or hypotheses of a study.

### **Presentation**

A presentation is any abstract, poster, or presentation that

- describes either a SNOCAP study or describes a study that uses SNOCAP resources or
- is presented to an audience that is outside the investigator's institution; for example, a national meeting.





# SNOCAP

State Network of Colorado Ambulatory Practices & Partners

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ACCORDS

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