For more than a decade, SNOCAP has invited research teams into monthly meetings to provide consultation on projects at various stages of funding. SNOCAP staff, research teams and partners, and others interested in working with SNOCAP share their project ideas with meeting attendees who serve as consultants. Consultants comment on the project or topic at hand, including how the project will support primary care practices and various communities across the state. SNOCAP PBRN network staff determines if there is interest in the topic and further facilitate what participating may look like.

The goal of hosting research teams at SNOCAP monthly meetings is first to determine if the project or topic is appropriate and if it will benefit SNOCAP practices and partners. We make decisions as a group and believe in transparency in the overall interest and relevance to the group. SNOCAP and its partners work to provide high quality patient care, do no harm, and always leave practices in a better place than when we started. Working with a PRBN isn’t right for every practice, project, or topic.

Note that SNOCAP networks are involved in a total of roughly 12-15 projects at a time, meaning many SNOCAP practices are already involved in a project(s) at any given time. If we agree to enter into a working partnership following your consultation, we want both you and our partnership to be successful in both the short term and long term; this will look different for every project and may include SNOCAP staff/faculty FTE, practice facilitation support and FTE, practice or patient compensation, etc.

We encourage research teams to engage via consultation early in proposal development stages. This lead time will help ensure the topic aligns with the priorities of SNOCAP and its partners, that adequate time is provided to share input and help understand the SNOCAP landscape, and provide ample time to adjust budget considerations as needed. We encourage specific budget line items for practice incentives, SNOCAP support FTE, and the consideration of working with patient or community working group collaboration.

Priority Topics

Each year, SNOCAP researchers, staff, and partners engage in a priority setting process to determine what topics our networks should focus on in the coming year. We place additional importance on projects that include one of the following SNOCAP priorities:

- COPD
- Diabetes
- Health Equity
- Social Determinants of Health
- Dementia
- Elderly Health
- Alcohol & Drug Misuse Interventions
- Immunization Delivery, Hesitance, & Refusal
- Social Isolation & Loneliness
- Reproductive Health & Justice
- Affordable & High Quality Healthcare
- Mental Healthcare Access & Community Resources
- Implementation & Practice Resources
- Pediatric Mental Health
- Substance Abuse/Mental Health Overlap
- Workforce Burnout & Staffing

SNOCAP Partners

SNOCAP staff facilitates and maintains relationships with practices, strives to understand the unique characteristics and needs of practices, and staff involvement helps to determine which practices might be a good fit for a specific project. Be aware that preserving SNOCAP’s long-standing practice, patient, and community relationships is essential to the future of our work. Our preferred role with external investigators is to continue to be engaged during the planning stages as well as during the project itself. We tend to not partner on projects that are simply looking for help with recruitment. As a rule of thumb, we ask practices to choose if they are interested in the topic and work/interact from there.

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