

2023 WPRN ANNUAL CONFERENCE

VIRTUAL AGENDA

WPRN ANNUAL CONFERENCE

Friday, May 19, 2023

ZOOM: https://washington.zoom.us/j/93041610070?pwd=MIBFWjhRT095TmNKektlaXFhK1drZz09

Meeting ID: 930 4161 0070 Passcode: 673578

8:45-9:00	Join Zoom Room, Networking
9:00-9:20	 Welcome & Opening Remarks Allison Cole, MD, MPH & Sebastian Tong, MD, MPH John Amory, MD, MPH, MSc Kari Stephens, PhD
9:20-9:45	Champion Group Introductions
9:45-10:45	Improving Health in our Communities through Innovative Practice Led Research: Examples from the WPRN • Kim Stutzman, MD • Charlie Jose, MD • Kelly McGrath MD, MS
10:45-11:05	Break
11:05-12:20	Opportunities for Researchers to Consult and Collaborate with WPRN Practice Champions • Leo Morales, MD, PhD, MPH • Pooja Tandon, MD, MPH • Andrea Hartzler, PhD • David Reed, PhD • Bridget Hanson, PhD
12:20-1:15	Break & Networking
1:15-1:45	Poster Session
1:45-2:15	Leveraging the Survey Research Panel to Drive Research Ideas: Results from the Knee Pain and Firearm Surveys • Kushang Patel PhD, MPH • Monica Zigman-Suchland, PhD(c), MPH
2:15-2:30	Break
2:30-3:30	Launching the 2023 WPRN Engagement ProjectSebastian Tong, MD, MPH
3:30-3:45	Wrap-Up & Evaluation





2023 WPRN Annual Conference FAQs

1. What is the WIFI Username and Password?

UW NetID: event0319

Password: ZWEE+XKAY+KSUU

2. What is the masking policy?

Masks are encouraged but not required.

3. Can we eat or drink in the conference rooms?

You can eat and drink in the conference rooms. There is also seating in the lobby area of the HUB and outside.

4. Where are the bathrooms?

When leaving the main conference room, walk straight towards room 245. You will find the bathrooms on the left-hand side. You may also refer to the HUB maps provided in this packet for reference.

5. How do I get reimbursed for parking?

Please scan and email Frank((ITHS Finance Team) a copy of your parking receipt after the conference.

Email: frankp22@uw.edu

6. How do I collect CME credits?

Please email James Probus (WPRN Program Coordinator) asking for a CME certificate. You will be emailed a digital certificate soon after. You must apply for credits with AAFP on your own.

Email: jprobus@uw.edu





WWAMI region Practice and Research Network (WPRN) 22-23 Annual Summary



Mission

To improve the health and well-being of patients in their communities, through the conduct of collaborative research that informs and enhances primary care clinical practice.

The WPRN is committed to promoting equity, diversity, inclusion, and justice through our research, operations, and partnerships with clinical organizations and investigators. The unique contributions and perspectives of our partners and collaborators of all races, cultures, ethnicities, nationalities, sexes, sexual orientations, gender identities and expressions, spirituality, ages, socioeconomic statuses, regions, and mental and physical statuses, are essential to ensuring the WPRN can accomplish high impact, collaborative research. The WPRN strives to be anti-racist through efforts to promote racial equity and justice in our research, partnerships, and operations.

Program Highlights

- Welcomed our 100th clinic to the network and our first naturopathic clinic.
- Onboarded 20 clinics over 5 organizations for a total of 119 clinics and 40 organizations.
- Supported 22 grant applications (5 funded, 13 pending, 4 unfunded).
- Collaborating on 32 active projects, 5 Survey Research Panel requests.
- WPRN projects published 11 manuscripts and 7 additional pending review.

WWAMI region Practice and Research Network (WPRN) 22-23 Annual Summary

Newest WPRN Member Sites

- Family Medicine Residency of Western Montana /Greater Valley Health Clinic,
 - Kalispell, MT
 - Champions: Samantha Greenberg & Leslie Diede
- Summit Pacific Medical Center
 - Elma, WA
 - o Champions: Janelle Wortman & Marcus Heisler
- Link Community Clinic
 - o Tacoma, WA
 - Champions: Luciano Garofalo & Gena Poling
- Confluence Health
 - Wenatchee, WA
 - Champion: Anton Grasch
- UW Medicine Primary Care Network Clinics
 - 16 clinics across Western Washington
 - Champion: Matthew Jaffy



Funding Agencies of WPRN Studies

- · Alcohol & Drug Abuse Institute
- American Heart Association
- Department of Health Human Services
 - Agency for Healthcare Research and Quality
- Fred Hutchinson Cancer Research Center
- Garvey Institute
- Harborview Injury Prevention & Research Center
- Health Resources and Services
 Administration
- Institute of Translational Health Sciences
- Merck
- OSHER Center

- National Institutes of Health:
 - Aaina
 - Arthritis and Musculoskeletal and Skin Diseases
 - Drug Abuse
 - National Cancer Institute
 - National Center for Complementary and Integrative Health
 - Mental Health
- Patient-Centered Outcomes Research Institute
- Robert Wood Johnson Foundation
- University of Washington
- UW Population Health
- Veterans Rural Health Resource Center

WWAMI region Practice and Research Network (WPRN) 22-23 Annual Summary

WPRN Champion Collaborator Publications

- Keppel G, Cole AM, Ramsbottom M, Nagpal S, Hornecker J, Thomson C, Nguyen V, Baldwin LM. Early Response of Primary Care Practices to COVID-19 Pandemic. J Prim Care Community Health. 2022 Jan-Dec;13:21501319221085374. PMID: 35289206.
- Cai X, Ebell MH, Geyer RE, Thompson M, Gentile NL, Lutz B. The impact of a rapid home test on telehealth decision-making for influenza: a clinical vignette study. BMC Prim Care. 2022 Apr 13;23(1):75. PMCID: PMC9006488.
- Miles C, Weidner A, Summit AK, Thomson CJ, Zhang Y, Cole AM, Shih G. Patient opinions on sexual and reproductive health services in primary care in rural and urban clinics.
 Contraception. 2022 Oct;114:26-31. Epub 2022 Apr 27. PMID: 35489391.
- Thomson CJ, Zhang Y, Weidner A, Summit AK, Miles C, Cole AM, Shih G. Patient concerns about accessing sexual and reproductive health services outside of primary care: A survey in rural and urban settings in the Pacific Northwest. Contraception. 2023 Mar;119:109901. Epub 2022 Oct 17. PMID: 36257376.
- Duggan C, Cushing-Haugen KL, Cole AM, Allen J, Gilles R, Hornecker JR, Gutierrez AI, Warner J, Baker KS, Ceballos RM, Chow EJ. Feasibility of delivering survivorship care via lay health educators: A pilot randomized controlled trial among rural cancer survivors. J Rural Health. 2023 Jan 2. Epub ahead of print. PMID: 36593127.
- Hser YI, Mooney LJ, Baldwin LM, Ober A, Marsch LA, Sherman S, Matthews A, Clingan S, Fei Z, Zhu Y, Dopp A, Curtis ME, Osterhage KP, Hichborn EG, Lin C, Black M, Calhoun S, Holtzer CC, Nesin N, Bouchard D, Ledgerwood M, Gehring MA, Liu Y, Ha NA, Murphy SM, Hanano M, Saxon AJ. Care coordination between rural primary care and telemedicine to expand medication treatment for opioid use disorder: Results from a single-arm, multisite feasibility study. J Rural Health. 2023 Apr 19. Epub ahead of print. PMID: 37074350.

Non-Champion WPRN Supported Publications

- Baldwin LM, Tuzzio L, Cole AM, Holden E, Powell JA, Parchman ML. Tailoring Implementation Strategies for Cardiovascular Disease Risk Calculator Adoption in Primary Care Clinics. J Am Board Fam Med. 2022 Dec 23;35(6):1143-1155. Epub 2022 Dec 2. PMID: 36460353.
- Cole A, Andrilla CHA, Patterson D, Davidson S, Mendoza J. Measuring the Impact of the COVID-19 Pandemic on Health Behaviors and Health Care Utilization in Rural and Urban Patients with Cancer and Cancer Survivors. Cancer Res Commun. 2023 Feb 1;3(2):215-222. Epub 2023 Feb 7. PMID: 36817949

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WWAMI region Practice and Research Network (WPRN) 22-23 Annual Summary

- Ma KPK, Mollis BL, Rolfes J, Au M, Crocker A, Scholle SH, Kessler R, Baldwin L-M, Stephens KA.
 Payment strategies for behavioral health integration in hospital-affiliated and non-hospital-affiliated primary care practices. Translational Behavioral Medicine. 2022; Aug 17;12(8):878-83.
 PMID: 35880768
- Nguyen AM, Cleland CM, Dickinson LM, Barry MP, Cykert S, Duffy FD, Kuzel AJ, Lindner SR, Parchman ML, Shelley DR, Walunas TL. Considerations Before Selecting a Stepped-Wedge Cluster Randomized Trial Design for a Practice Improvement Study. Ann Fam Med. 2022 May-Jun;20(3):255-261. PMID: 35606135
- Xie SJ, Kapos FP, Mooney SJ, Mooney S, Stephens KA, Hartzler AL, Pratap A. Geospatial divide in real-world EHR data: Analytical workflow to infer regional biases and potential impact on health equity AMIA Summits 2023, in Press (Awaiting pubmed ID assignment)

WPRN Leadership

WPRN COORDINATING CENTER

o Allison Cole, MD, MPH -

Director

o Sebastian Tong, MD, MPH -

Associate Director

o Laura-Mae Baldwin, MD, MPH -

Senior Advisor

o Monica Zigman Suchsland, MPH -

Research Scientist

o Dillon van Rensburg, MPH, MCHES -

Research Scientist

o James Probus, BA -

Program Coordinator

STEERING COMMITTEE

- o Ellen Bluett, PhD, Missoula, MT
- o Paul Costanza, PhD, Puyallup, WA
- o Janelle Guirguis Blake, MD, Tacoma, WA
- o Jaime Hornecker, PharmD, Casper, WY
- o Adriana Linares, MD, MPH, DrPh,

Vancouver, WA

- o Kelly McGrath, MD, MS, Orofino, ID
- o Amanda Weidner, MPH, Seattle, WA





2023 WPRN Annual Meeting Speaker Biographies

Keynote Speakers:



Kelly McGrath, MD, MS

Dr. Kelly McGrath MD, MS has practiced full-spectrum rural Family Medicine in his rural Idaho community for 29 years. He serves as Chief Medical Officer at two Idaho Critical Access Hospitals: Clearwater Valley Health and St. Mary's Health. Dr. McGrath also serves as the Medical Director for the Idaho Medicare Quality Improvement Organization, Comagine Health, where he works to improve the safety and quality of care for patients throughout Idaho. He is passionate about transforming rural healthcare to deliver high value care while supporting the health and vitality of patients and the communities in which they live. He is a graduate of the University Of Washington School Of Medicine and the Ventura County Medical Center Family Medicine Residency program.

He serves on several committees at the regional, state and national level to improve the health and lives of patients with particular emphasis in those living in rural and frontier settings.

Charles Jose, MD, MPH

Dr. Jose joined PeaceHealth in 2020 in the Primary Care Clinic and was most recently Chief Resident at Family Medicine Residency of Western Montana (University of Montana). His academic journey highlighted the importance of social justice in medicine. Dr. Jose is particularly interested in health policies that improve patient-centered health outcomes, rural and underserved medicine, and wilderness medicine. Most recently, he has focused his research interest on health equity for the Filipino community, and he is fluent in both English and Tagalog. Dr. Jose loves exploring the outdoors, both on land and underwater. Dr. Jose earned a Master of Public Health degree from Boston University School of Public Health and his medical degree from the University of Nevada, Reno, School of Medicine.





Kimberly Stutzman, MD

Dr. Stutzman grew up in Northern Michigan and trained at the University of Michigan School of Medicine. She completed a residency at Family Medicine Spokane. After a year at the University of Washington as a fourth year chief resident she settled in White Salmon, Washington in a small rural practice. After 12 years of wonderful, broad-spectrum, rural, community-based care she moved to Boise in 2007 to pursue teaching at the residency program. She has special interest areas in geriatrics, medical student teaching, and training the next generation of rural family doctors. In 2019 she became the inaugural program director for the Full Circle Health Family Medicine Residency of Idaho Nampa program. This community-based, 6 resident per year, program focuses on training residents to provide full-scope care in resourced-limited environments such as rural and urban FQHCs.

Speakers, Panelists and Moderators:

John K. Amory MD, MPH, MSc

Dr. Amory received his undergraduate degree from Harvard University and his M.D. degree from the University of California, San Francisco where he also completed his residency in Internal Medicine.

Additionally, he has earned both a Master's degree in Public Health and a Master's degree in Pharmaceutics from the University of Washington. He is currently a Professor of Medicine and Section Head of General Internal Medicine at the University of Washington Medical Center where he works as an attending physician on the inpatient medicine wards and in the General Internal Medicine and Men's Health Clinics. He is the Co-Director of the UW KL2 program and Associate Director of the ITHS at UW. Dr. Amory has published more than 180 peer-reviewed papers and



chapters in male reproductive health. His work focuses on the development of novel male contraceptives and improved treatments for men with infertility and hypogonadism.



Kari Stephens, PhD

Dr. Kari Stephens is Helen D. Cohen Endowed Professor, Research Section Head, Director of Clinical Research Informatics, and Associate Professor in Family Medicine and Adjunct Associate Professor in Biomedical Informatics and Medical Education at the UW School of Medicine. Dr. Stephens is a practicing clinical psychologist and biomedical informaticist conducting research focused on health equity, integrated behavioral health, chronic pain, posttraumatic stress disorder, anxiety, depression, substance use, cancer, long COVID, and informatics data sharing, particularly in primary care settings. Dr. Stephens currently conducts clinical

clinical research and leads informatics and innovations in data sharing as Director of Data QUEST, overseeing a regional electronic health record systems based primary care data sharing network, which has supported over \$100M in grant funded projects, as an Associate Director with the National Alzheimer's Coordinating Center, and as an executive faculty member within the Institute of Translational Health Science's Biomedical Informatics Core.

Amanda Weidner, MPH

Amanda Weidner has worked in academic family medicine research and administration for over a decade. In her current position with the UW Department of Family Medicine, she oversees the data and research efforts of the WWAMI Family Medicine Residency Network. She also supports the Network's strategic planning process, many of the projects born from this process, and the professional development for the residency program directors. Amanda serves as lead staff in the Network's role as the Western Hub of the Technical Assistance Centers for the HRSA Rural Residency Planning and Development grant program and the HRSA Teaching Health Center Planning and Development grant program. In addition to her role at the UW, Ms. Weidner is the Executive



Director of the Association of Departments of Family Medicine, the organization representing academic departments of family medicine at medical schools and academic health systems across the country. Her dual roles allow for insights from around the country alongside a detailed understanding of residency education.



Pooja S. Tandon, MD, MPH

Dr. Pooja Sarin Tandon is a general pediatrician and researcher at the Seattle Children's Research Institute and Associate Professor at the University of Washington's School of Medicine and Adjunct Associate Professor at the School of Public Health. Dr. Tandon attended Brown University for undergraduate and medical school, and completed residency training at the Boston Combined Program in Pediatrics. She completed a general pediatrics research fellowship and a Master of Public Health (MPH) degree at the University of Washington. Her research interests include promoting healthy behaviors (such as physical activity and outdoor time) to support children's well-being and child health equity.

She is co-author on a chapter focused on Nature & Health in the latest edition of the Textbook on Children's Environment Health. She has authored over 50 peer reviewed manuscripts. Her research funders include the American Heart Association, the Robert Wood Johnson Foundation and the National Institutes of Health.

David Reed, PhD

Dr. David Reed is a clinical psychologist and health services researcher in the Department of Health Systems and Population Health at the University of Washington, where he is a Postdoctoral Scholar. Dr. Reed is also an incoming Health Sciences Research Specialist at the Center of Innovation, VA Puget Sound, where he has been a fellow for over the past 2 years. His research focuses on bringing a more holistic approach to care through the development and evaluation of systems-based approaches for delivering complementary and integrative health interventions (i.e., mind-body interventions) for complex patient populations. His particular expertise and interest is in the interaction between co-occurring chronic pain and posttraumatic stress disorder (PTSD) and the development of



complementary and integrative health intervention to promote physical and emotional health within populations to promote physical and emotional health within opulation.

He was recently awarded a career development grant from the National Center for Complementary and Integrative Health, which is the funder of the project he is presenting today. Dr. Reed's research also includes ensuring equity in intervention delivery in rural populations and the role of meaning-making and meaning in life among individuals with chronic pain and PTSD. At VA Puget Sound, he works with local leaders and the National Office of Patient-Centered Care and Cultural Transformation to develop and evaluate VA's ongoing Whole Health Transformation, which centers holistic care and patient-centered Veteran perspectives of "what matters most."



Andrea Hartzler, PhD

Andrea Hartzler is an associate professor in the Department of Biomedical Informatics and Medical Education at the University of Washington (UW) School of Medicine and co-directs the Clinical Informatics and Patient-Centered Technologies Graduate Program for healthcare professionals. Her research focuses on the human-centered design of health technologies that promote health equity and patient experience. Funded by NIH, NSF, and other funding agencies, Dr. Hartzler leads projects that bring together interdisciplinary teams of clinicians, computer scientists, data scientists, community advocates, and health system stakeholders in the development and evaluation of equity-focused health technology.

Two recent examples include: 1) automated assessment of patient-provider interaction for signals of implicit bias, and 2) characterizing the voices of patients to inform the fair and ethical implementation of systems that automatically detect social determinants of health from clinical notes in the electronic health record. Dr. Hartzler teaches and mentors rrainees from undergraduate to postdoctoral levels and serves as a clinical informatics leader at UW Medicine by contributing to operational projects. She holds a PhD in Biomedical informatics from UW and was an Assistant Investigator at Kaiser Permanente Washington Health Research Institute before returning to UW in 2017.

Bridget Hanson, PhD

Bridget Hanson is a senior research scholar at the Center for Health and Safety Culture (CHSC) at Montana State University. CHSC works with communities and organizations using an appreciative approach to grow shared values and beliefs that result in healthier and safer behaviors. Bridget is a social psychologist by training and her primary research interests are social cognitions and how they relate to health and wellbeing. She uses mixed methods in applied research and evaluation and has experience in a range of public health topics, including substance misuse prevention, harm reduction, suicide prevention, and traffic safety.



She has over ten years' experience in research and evaluation on preventing consequences of alcohol misuse such as fetal alcohol spectrum disorders (FASDs) and is interested in both community- and systems-level approaches that can further effective prevention.



Leo Morales, MD, PhD

Leo S. Morales is a Professor in the Division of General Internal Medicine and an Adjunct Professor of Health Services. He serves as Chief Diversity Officer for the School of Medicine. He also serves as director of the Center for Health Equity, Diversity and Inclusion in the School of Medicine and co-director of the Latino Center for Health in the School of Public Health. Prior to joining UW, he held faculty appoints at UCSF, UCLA and the Group Health Research Institute. Dr. Morales's research has focused on measurement of patient reported outcomes in diverse populations, and minority health and health disparities including immigrant and Latino Health.

Dr. Morales received his medical degree from the University of Washington and completed a residency in primary care internal medicine at UCSF/San Francisco General Hospital. He completed a research fellowship in primary care at UCLA and received his Ph.D. in Policy Studies from the RAND Graduate School. He also received an M.P.H. in Health Services from the University of Washington.

Elise Hoffman, MPH Student

Elise Hoffman is a Research Coordinator at the University of Washington and a graduate student at the Harvard T.H. Chan School of Public Health studying Health and Social Behavior. Her research interests include chronic disease prevention, behavior change, and implementation science. She is specifically interested in leveraging qualitative methods to understand individual and community barriers to health-promoting behaviors, including physical activity, to achieve behavioral change. Over the past 4 years she has worked with Dr. Kushang Patel in the UW Division of Pain Medicine to implement community and primary carebased studies in both urban and rural areas with the aim to improve pain management in older adults through non-pharmacological treatments such as exercise and cognitive-behavioral therapy.





Monica Zigman Suchsland, MPH

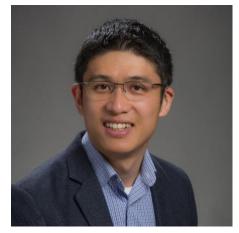
Monica Zigman Suchsland is a Research Scientist in the Department of Family Medicine and a PhD candidate in the Department of Epidemiology at the University of Washington. Her dissertation aims to improve understanding of the clinical course of concussion through self-reported symptoms and time to recovery after sustaining a sports-related concussion.

Her primary role as a Research Scientist is split between coordinating the WWAMI region Practice and Research Network and managing the Cognition in Primary Care Program (Cognition-PrimaryCare.org).

She has worked in health research for over 16 years. Her previous work includes studies developing a clinical quality measure for lung cancer diagnosis, exploring methodology for studying home tests for influenza, understanding patient-centered outcomes of diagnostic imaging, measuring prevalence and outcomes of sudden cardiac arrest and death in young athletes, conducting a clinical trial of platelet rich plasma for patellar tendinopathy, and investigating environmental risk factors that impact health outcomes.

Sebastian Tong, MD, MPH

Sebastian Tong is a family physician and addiction medicine specialist practicing at Harborview Family Medicine Clinic in Seattle, WA. He is an Assistant Professor of Family Medicine and Associate Director of the WWAMI region Practice and Research Network. He graduated from Boston University School of Medicine, completed residency at the Lawrence Family Medicine Residency in Lawrence, MA, and received a Master of Public Health from Harvard School of Public Health. His research focuses on addressing social needs and loneliness, and improving evidence-based treatments for chronic pain and substance use in primary care.



2023 WPRN ANNUAL CONFERENCE NEW COLLABORATION DISCUSSION QUESTIONS

Project Nature: A strategy to promote childhood outdoor physical activity via primary care Pooja Tandon, MD, MPH

clinic?	pate for providers in being able to implement PN in your
1b. What challenges do you antici	pate for families in being able to implement PN?
2. What suggestions do you have f	for improving the toolkit - website, brochure, toys?
3. What challenges may come up t	for research procedures (i.e., pre/post surveys, qualitative)?
4. Do you have any suggestions fo	
-	Health Stepped Care for Co-occurring Chronic Pain and PTSD
David Reed, PhD 1. Are any clinics using a holistic a	pproach to care already?
David Reed, PhD 1. Are any clinics using a holistic a 2. To what degree are providers in in your community?	
David Reed, PhD 1. Are any clinics using a holistic a 2. To what degree are providers in in your community? 3. What would make participation	pproach to care already? your clinic aware of the Whole Person/Holistic care available
David Reed, PhD 1. Are any clinics using a holistic a 2. To what degree are providers in in your community? 3. What would make participation	pproach to care already? your clinic aware of the Whole Person/Holistic care available in this study attractive in your clinic?
David Reed, PhD 1. Are any clinics using a holistic a 2. To what degree are providers in in your community? 3. What would make participation 4. What resources or tools would occurring chronic pain and PTSD	pproach to care already? your clinic aware of the Whole Person/Holistic care available in this study attractive in your clinic? be helpful for clinics wanting to put a holistic approach for co
David Reed, PhD 1. Are any clinics using a holistic a 2. To what degree are providers in in your community? 3. What would make participation 4. What resources or tools would occurring chronic pain and PTSD	pproach to care already? your clinic aware of the Whole Person/Holistic care available in this study attractive in your clinic? be helpful for clinics wanting to put a holistic approach for co into place?

UnBIASED Understanding Biased patient-provider Interaction and Supporting Enhanced Discourse Andrea Hartzler, PhD 1. How could the UnBIASED tool complement or extend diversity training initiatives in community-based primary care practices? 2. What are the biggest opportunities you see for implementing this technology as an innovative educational approach? 3. What barriers might you anticipate to implementing the UnBIASED tool in community-based practices? Preventing Substance-Exposed Pregnancies: Leveraging the EHR Bridget Hanson, PhD

How important is preventing substance-exposed pregnancies (alcohol, cannabis)?	
2. What are current screening and intervention (e.g., SBIRT) practices?	
	•••
3. How realistic is modifying the EHR? What is the likely timeline and cost?	

Latinx Long COVID Survey

Leo Morales, MD, PhD

Questions available on PowerPoint presentation





2023 WPRN ANNUAL CONFERENCE POSTER PRESENTATION

IN-PERSON PRESENTATIONS

Post-Acute Sequelae of SARS-CoV-2 (PASC): Analysis of Autoantibody Abnormalities and Impact of Pain on Quality of Life and Function

Niki Gentile, MD, PhD University of Washington

Colonoscopy Outreach for Rural Communities (CORC)

Gina Keppel, MPH University of Washington

Continuing Education Through an Assessment of Laboratory Stewardship

Rachel Geyer, MPH University of Washington

Harm Reduction in Primary Care: Meeting Clinics Where They're At

Brittany Blanchard, PhD University of Washington

"Won't Go Back" Needs Assessment

Ian Bennett, MD, PhD University of Washington Delivering Cancer Survivorship Care via Lay Health educators: A Pilot Randomized Controlled Trial among Rural Cancer Survivors

Eric Chow, MD, MPH Fred Hutch Cancer Center

Building a Health Equity Roadmap: A FQHC's Journy

Ginna Many, MA, PhD

Central Washington Family Medicine Residency Program

Designing the Tools to Identify and Treat Loneliness in Young Adults in Primary Care

Brennan Keiser, MSW University of Washington

QI Review of a Family Medicine Residency Equity

program: What We Learned About JEDI

Winslow Gerrish, PhD Family Medicine Residency of Idaho

UW Firearm Injury and Policy Research Program and the WPRN: A Partnership to Recruit and Implement a Firearm Safety Intervention in Primary Care

Laura Prater, PhD University of Washington

VIRTUAL PRESENTATIONS

Ambulatory Antibiotic Prescribing for Children in a Practice Research Network

Lauren Mitchell, MPH University of Colorado

The Impact of the COVID-19 Pandemic on Opioid Prescribing in Primary Care

Lili Szabo, MD University of Washington Rural-Urban Differences in Access to Medication Treatments for Opioid Use Disorder Across the U.S.

Darcie Caldwell, BS University of Washington

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2023 WPRN ANNUAL CONFERENCE

WPRN ENGAGEMENT PROJECT: LONELINESS AND PRIMARY CARE SEBASTIAN TONG, MD, MPH

Dyad Discussion Questions

1) How has loneliness and social isolation affected your clinical practice and/o patients?				
2) What can we learn about loneliness in WPRN primary care clinics?				
Small Group Discussion Questions 1) What can we learn about loneliness in WPRN primary care clinics? (Phrase in				
form of a question)				
2) Prioritize top 3 questions as a group				
3) Identify an individual to report out from your group				







SURVEY RESEARCH PANEL

Seeking new members!

What is the SRP?

A registry of clinicians from community-based primary care practices who share expertise with researchers. The goal of the panel is to ensure primary care voices are included in research that improves practice. The WPRN Coordinating Center at the University of Washington manages the panel.

Eligibility

- Any clinician (MD, DO, NP, PA, PharmD or behavioral health specialist)
- Provide care in a primary care setting
- Practice at a WPRN-affiliated clinic

Benefits

- Contribute to research that influences primary care
- Demonstrate scientific collaboration by listing service on your CV
- Receive thank you gift cards for completing surveys
- · Receive a brief summary of survey results

Details

- Panel members receive no more than 5 surveys each year
- In general, surveys should take 5-10 minutes to complete
- Surveys will be sent by email
- Surveys will be from WPRN- affiliated researchers
- You do not have to participate in any survey
- Withdraw from the WPRN Survey Research Panel at any time by contacting the WPRN Coordinating Center

Sign up today:

https://redcap.link/surveyresearchpanel







A Survey of Current Practices and Preferences for Models of Care Delivery for Hepatitis C Treatment

Investigator(s)	Judith Tsui MD, MPH, Professor, University of Washington, Department of Medicine		
Jocelyn James, MD, Assistant Professor, University of Washington, Department of Medicine			
Background: Achieving hepatitis C virus (HCV) elimination by 2030, a national goal, will require expanded treatment			
_	access, including for people who use drugs (PWUD). A major barrier to achieving elimination is a shortage of treatment		
· ·	e Medicaid policies allow primary care providers to prescribe medications for HCV; however, a recent		
,	policy changes have not translated into increased treatment rates in the state (Auty SG 2021). Little		
· ·	nary care provider (PCP) views, practices and preferences regarding HCV treatment. Various models		
	ary care providers to treat HCV include Project ECHO/telemedicine models, partnering with		
	h collaborative practice agreements, and embedding specialists in clinics. This study seeks to		
describe current PCP practice regarding HCV treatment and to explore the acceptability / feasibility of using			
collaborative appro	aches with pharmacists to treat hepatitis C, including for PWUD.		
Study Aims	The goals of this project are to:		
•	1. Describe current practices in screening for and treating HCV among PCPs. Specifically, we want		
	to understand whether PCPs directly provide HCV treatment, including to PWUD, and if so, what		
	training and supports they utilize (e.g. Project ECHO, consultation with a specialist, collaboration		
	with a pharmacist, etc.).		
	Describe PCPs' prior experiences collaborating with pharmacists, including through		
	Collaborative Practice Agreements (i.e. CPA).		
	3. Explore PCPs' willingness and interest in collaborating with pharmacists to provide HCV		
	treatment, including through CPAs.		
Who participates	Physician, NP, or PA, currently licensed to practice, English-speaking, in Washington State,		
par diorparco	practicing primary care		
Evidence Based			
Intervention?	Choose 1 Brief Summary of Evidence or if not evidence-based, summary of study rationale		
	Studies from other countries demonstrate the effectiveness of pharmacist-based		
(Choose 1)	No models of care for HCV ¹ . We have an ongoing NIH-funded study piloting this model		
Ctudu Dasina	N/A for persons who inject drugs.		
Study Design	Cross-sectional survey		
Study Period	Winter - Spring 2023		
Study Procedures	Research team will select 5-10 clinics to invite to participate in survey based on geography		
	(aiming for representation from Eastern Washington and rural clinics).		
	• Site champion works with clinic leadership and the study research team to send an online 5-7-		
	minute survey to clinicians (MD, DO, NP, PA) at their organization, with the goal of recruiting a		
	total of 50-75 providers to complete the survey.		
	Surveys will include questions about provider demographics, characteristics of practice,		
	provision of buprenorphine for opioid use disorder, approach to HCV screening, prior		
	experience treating HCV, prior experiences collaborating with pharmacists, and attitudes		
	toward utilizing CPAs with pharmacists to treat HCV.		
	Select clinic level data will be abstracted from Member Information Form data.		
Site Requirements	Site champion willing to facilitate administration of the survey in their clinic.		
Benefits to	There is no immediate benefit to sites; however, we hope that the research will inform this area of		
Participating Sites	clinical practice and lead to funding of a multisite implementation study of a pharmacist model for		
	HCV treatment.		
Communication	City will provide a company that for district the company to the c		
Compensation	Sites will receive compensation for distributing the survey. Participating clinicians will receive		
	incentives for completing the survey.		





Funding	The University of Washington Medical Student Addiction Research (MedStAR) R25 program.
Contact	WPRN Coordinating Center: Monica Zigman Suchsland, mzigman@uw.edu

¹Radley, A., Tait, J., & Dillon, J. F. (2017). DOT-C: A cluster randomised feasibility trial evaluating directly observed anti-HCV therapy in a population receiving opioid substitute therapy from community pharmacy. Int J Drug Policy, 47, 126-136. https://doi.org/10.1016/j.drugpo.2017.05.042





Complementary and Integrative Health Stepped Care for Co-occurring Chronic Pain and PTSD

Investigator(s)	David Reed, PhD – Postdoctoral Scholar – University of Washington (UW) Department of Health Systems and Population Health, School of Public Health	
	Steve Zeliadt, PhD - UW Dept. of Health Systems and Population Health, School of Public Health	
	Charles C. Engel, MD - UW Dept. of Psychiatry and Behavioral Sciences, School of Medicine	
Background: Most patients with pain initially seek treatment through primary care, where effective complementary and integrative health (CIH) therapies are often not available. Stepped care for chronic mental and physical health conditions, where patients begin with low intensity treatments (e.g., psychoeducation) and are then "stepped up" to more intensive treatments if there is little or no improvement, is effective and a way to improve patient access to care; however, a stepped care approach utilizing CIH therapies for co-occurring chronic pain and PTSD has yet to be tested.		
Study Aims	1. Identify provider strategies and patient perspectives relevant to treating co-occurring chronic pain and PTSD.	
	2. Refine the prototype of an evidence-based CIH stepped care approach for co-occurring chronic pain and PTSD in a primary care clinic.	
Outcomes of Interest	<u>Aim 1:</u> Understand clinic treatment protocols and strategies for patients with co-occurring chronic pain and PTSD, as well as patient perspectives on well-being and how pain and PTSD interact.	
	<u>Aim 2:</u> A model of a CIH stepped-care approach for co-occurring chronic pain and PTSD to implement in primary care	
Evidence Based	Choose 1 Brief Summary of Evidence or if not evidence-based, summary of study rationale	
Intervention?	Yes N/A	
(Choose 1)	No N/A	
Intervention	N/A	
Design,IRB,Cons.	Qualitative (Aims 1 and 2); IRB & consent obtained	
Study Period	June 2023-Feb 2025	
Study Procedures	Aim 1 (April 2023-Feb 2024):	
	• Clinic identifies 2 administrators for semi-structured interviews and 8 providers/staff to participate in 2 focus groups. Our goal is to recruit 3 primary care providers (MD/DO, NP, PA), 4 other clinicians (e.g., nurses, medical assistants, behavioral health providers) & 1 staff member (e.g., front desk).	
	Clinic employees will be identified through internal recruitment efforts	
	The interviews and focus groups will each be approximately 60 minutes	
	Clinic identifies 15 culturally diverse patients with co-occurring chronic pain and PTSD to take part in 45-minute semi-structured interviews	
	Patients will be recruited through medical records and provider referral	





	Aim 2 (March 2024-Feb 2025):
	 Clinic identifies 5 new culturally diverse patients (<u>different patients from Aim 1</u>) with co- occurring chronic pain and PTSD to complete brief interviews and quantitative assessments helping guide the development of a primary care-based intervention.
	Patients will be recruited through medical record and provider referral.
	 Clinic identifies 5 new clinic employees (<u>can be same</u> admin/providers/staff/other clinicians from Aim 1 if needed). Our goal is to have 3-4 providers and 1-2 administrators for this aim ("Storyboarding" the intervention).
	Clinic employees will be identified through internal recruitment efforts
Study Site Requirements	Ability to meet recruitment needs, particularly around diverse patient population and number of clinic employees (no residents as participants, and need to be at clinic >1year)
Benefits to Participating Sites	Contribute to development of evidence-based intervention for vulnerable population
	Increased identification and treatment of PTSD among patients with chronic pain
	 Involvement in preliminary discussions to develop efficient and implementable clinic procedures to identify and assess over time symptoms of patients with co-occurring chronic pain and PTSD integrated into the medical record system
Compensation	Compensation to the clinics to offset time spent facilitating research activities
	Patients=\$50 for Aim 1 and \$50/hr. for Aim 2; clinic employees=\$100/hr. for Aims 1 and 2
Funding	K99AT012054-01/02; National Center for Complementary and Integrative Health
Contact Info	Monica Zigman Suchsland, WPRN Coordinating Center, mzigman@uw.edu



Educate • Engage • Empower

E3 SUMMIT

Pathways to Advancing Health Equity

June 14, 2023-June 16, 2023

Ted Ferry Civic Center

Ketchikan, Alaska

JUNE



8:00AM - 2:00PM CommUNITY Dialogue FACILITATED BY: Dr. Angela Michaud

5:30PM - 8:00PM Welcome Gathering 6:00PM Keynote Speaker MICHAEL TUNCAP

EDUCATE

Uniting Southeast Alaska, Ketchikan, and surrounding communities to embrace the work involved in advancing health equity. From learners to experts, from health care providers to community advocates; we will build shared community definitions of key health equity 101 concepts and identify actionable steps to reduce health disparities and improve health equity within one's own practice area.

JUNE



8:00AM - 1:00PM Transforming Institutions through Partnership

FACILITATED BY: Dr. Gary Ferguson

1:00PM - 4:30PM Cultural Excursion Experience

ENGAGE

Influencing system and community level changes that honor cross-cultural community experiences and leadership, inspire community leaders leading change regionally and nationally and identify public health imperatives for greater equity.

> 11:00AM: Featured Speaker Dr. Anne Zink State of AK Chief Medical Officer

JUNE



8:00AM - 2:30PM Harvesting insights from cultural experiences through a showcase of community based efforts

FACILITATED BY: Cultural Wellness Center and Dr. Hasshan Batts

EMPOWER

Communities will gain insight from community examples of partnership and collaboration, reflect on key practices for advancing health equity and build individual and community resilience in leading equity. Attendees will leave with practical tools that can be applied to their community.

KETCHIKAN WELLNESS COALITION



Cultural Wellness Center









SCAN ME







alma@ketchikanwellness.org



602 Dock St. Ste. 108 Ketchikan, AK 99901

REGISTRATION NOW OPEN

https://ketchikanwellness.org/e3-health-summit/register/