

THE NEWSLETTER OF PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION

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2017 - Off to a Fast Start, as President Trump and a New Administration Transition

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If you would like to contribute to future issues of PIRE News, please send your stories and/or announcements to dacanay@pire.org

Feedback on PIRE News articles and format is vital to the editorial staff in planning future issues. If you have any questions or comments please visit http://rock.pire.org/internal/feedback.htm

2017 – Off to a Fast Start, as President Trump and a New Administration Transition



by Bernie Murphy

We are all keenly aware of the impact and change a new administration brings. But with the surprising election of Donald J. Trump, we are even more attuned to the new initiatives, altered policies and different federal agency leadership. *"The times they are changing"* and we are all watching closely. However, the beat goes on at PIRE and we are not simply waiting and watching.

Below, I highlight and update some of PIRE's 2017 key activities and initiatives.

I. Recruitment is a high priority in 2017 for PIRE. We would like to find Senior Scientists to join PIRE and continue to recruit new investigators while retaining our emerging investigators. A "finder's fee" will be paid to PIRE Staff who successfully recruit new talent, as detailed below.

Payment for Recruitment Assistance by PIRE Staff

PIRE is seeking to expand its Staff. The following represents the type of Staff we are seeking:

- Senior Scientists/Principal Investigators who bring their work to PIRE and/or submit applications/proposals for funding through PIRE. PIRE employment is contingent upon awards or the transfer of project funding to PIRE. Review of the applications, prior to submission, must be made by two PIRE Senior Scientists and concurrence by the Center Director.
- Emerging Qualified Investigators (Postdoctoral Fellows and relatively new scientists) – who want to submit an application/proposal through PIRE. PIRE employment is contingent upon awards to PIRE. Review of applications, prior to submission, must be made by two PIRE Senior Scientists and concurrence by the Center Director.

Should a PIRE Staff recruit a new staff member to PIRE, the following payments will be made:

- 1. \$500 for applications/proposals of \$250,000 submitted through PIRE.
- 2. 1% of a first award or transfer value to PIRE.

Should other types of recruitments occur, payments will be determined by the CEO and CFO.

PIRE advantages include: our long standing research integrity and reputation, individual researcher autonomy, excellent benefits, location flexibility, strong research support infrastructure (Site Administrators, Library, IRB, IT, HR and G&C) first-rate fiscal standing and corporate financial support for pilot studies and application development.

Examples of Centers already expanding and recruiting include:

- At the end of 2016, Louisville hired Bonnie Richard, April Schweinhart and rehired Steve Shamblen (see December 2016 PIRE News)
- DSI has successfully recruited staff from Brown University's Center for Alcohol and Addiction Studies postdoctoral program and continuing to do so.
- BHRCS has postdoctoral fellows who are being considered.
- Calverton is in conversations with new postdoctoral fellow recruits.
- Chapel Hill is reaching out to past employees and is showing promise.
- PRC is exploring submitting applications from qualified postdoctoral fellows outside of the PIRE. PRC continues to train an exceptional group of postdocs.
- II. Cannabis continues to be an expanding area for PIRE. A special edition of the *Journal of Primary Prevention* that includes a multiple PIRE staff-authored cannabis article is near publication.
 Moreover, three PIRE scientists (Karen Friend, Bettina Friese, and Bridget Friestler) are serving as guest editors for this special issue.

The California cannabis tax may have an organizational eligibility requirement for researchers. Funding may only go to a California entity and we are addressing that potential new requirement.

PRC is submitting, or has submitted, seven new NIDA cannabis applications this quarter.

- 1. Effects of Local Marijuana Policies and Availability on Use Among Youth, M.J. Paschall, submitted on 01/27/17
- Impacts of Marijuana Commercialization on Adolescents' Marijuana Beliefs, Use, and Co-Use with other Substances Sharon Lipperman-Kreda and Joel Grube, scheduled for March submission
- 3. Agglomerative Health Impacts of Commercial Alcohol and Marijuana Markets, Paul Gruenewald scheduled for end of February submission
- 4. Cannabis Dispensaries and Stores: Variations in Services, Products, Clientele, and Local Ecology, **Bob Saltz**, submitted on 01/27/17
- 5. Marijuana Availability, Marijuana Use, and Child Abuse and Neglect, Bridget Freisthler, submitted in December 2016 with Ohio State University, PIRE subcontract
- 6. Geography of Medical Marijuana Dispensaries and Adolescent Beliefs and Behaviors, **Bettina**Friese, scheduled for March submission

- 7. Social Media Environment for Cannabis in the Era of Legalization, **Juliet Lee**, submitted 2/1/17
- III. **Opioid** funding to address the ongoing opioid epidemic has started to emerge from several Federal agencies. CARA and 21st Century Cure Act funding is part of the continuing resolution that the federal government is operating under, until April, and the next congressional budget appropriates. PIRE continues to prepare and apply for those opportunities that have been released, details follow.

We have already seen opioid-related funding flow to the VHA and states via SAMHSA. PIRE has applied to an announcement to evaluate Alabama's opioid treatment programs. We expect that other states will soon announce evaluation opportunities. This is an expansion of our longstanding state evaluation work funded by SAMHSA, primarily completed out of Chapel Hill, Louisville and BHRCS.

In preparation for, and expanding on, existing state evaluation and other RFPs, the *Monday Noon Development Group* continues to review and assess announcements each week. In addition, the following activities are occurring. If you are interested in more information, contact the staff or me for additional details.

- Bob Saltz is leading the development of an opioid prevention intervention logic model, similar
 to the PIRE underage drinking logic model, that has been used extensively by SAMHSA and
 many states.
- 2. **Chris Ringwalt** is adding the evidence for the interventions in the logic model, as was done for the underage drinking logic model.
- 3. Current state evaluation being done by PIRE staff leads include **Bob Flewelling**, **Al Stein-Seroussi** and **Martha Waller**. These staff also are part of a review group of the logic model and its application in their existing state work.
- 4. **Kathy Atwood** and **Karen Friend** are preparing a traditional corporate capability statement, capturing PIRE's grants, contracts and publications in opioids.
- 5. We are anticipating, following the federal budget appropriations of CARA and the 21st Century Cure Action, that new funding will flow. Specifically, we are monitoring:
 - a. SAMHSA in addition to treatment evaluation, we anticipate prevention and other evaluation RFAs.
 - b. NIJ We have three new contracts starting in 2017. In addition, NIJ has indicated they are preparing for the second half of 2017 and funding opioid efforts with police and communities.
 - c. We are also monitoring research funding opportunities from CDC and NIH.
- IV. VHA New initiatives are being planned for 2018 that will utilize tools and training from the current VHA contract for the 2018 expansion. These activities are featured in a separate article, <u>"The Second Year of the VHA Whole Health Contract is Well Underway"</u> in this issue of PIRE News.

The above represents some of the work across PIRE. This is not meant to be a comprehensive review. I invite those not featured in this issue of PIRE News to share your individual or teams efforts.

2017 promises to be a challenging year of transitions at the national level and PIRE is preparing and moving forward to meet those challenges and opportunities.

Please let me know if you have any questions and/or contact the staff mentioned.

All Ahead Full in 2017!

Bernie

SPOTLIGHT

The second year of the VHA Whole Health contract is well underway



David Rychener, Project Director **Bill Scarbrough**, Louisville Center Director and Lead Evaluator **Ann Mason**, Program Director

The new 2017 VHA contract, providing expanded course offerings for clinicians, increased evaluation and other new components, was marked by a kick-off meeting in Madison, Wisconsin this past fall to plan the implementation of the whole health initiative. The meeting was attended by PIRE Project Director, David Rychener, CEO Bernie Murphy, Center Director and Lead Evaluator. Bill Scarbrough, and Program Director, Ann Mason, along with Veterans Health Administration (VHA) leaders and PIRE's partners from the University of Wisconsin Integrative Health and MicroAssist.



Key leaders from the Veterans Health Administration, PIRE, MicroAssist and UW-DFMCH met to discuss the next phase of the VHA whole health initiative. (Credit to Armando Vera for the photo)

Whole Health's First Steps

The whole health initiative aims to advance a "whole person" approach to health care—one in which health care teams partner with patients to look beyond traditional disease management and wellness approaches and work to co-create health and well-being.

The whole health approach encourages people to reflect on what matters most to them and how it relates to their health. It emphasizes self-care, prevention, and the evidence-informed use of conventional and complementary care. This broader lens supports the health care partnership, and aids patient healing and clinician fulfillment.

Milestones Achieved with Clinical and Coaching Courses

The courses and materials developed under the first VHA contract in 2013, and continued through the present contract, include the Whole Health Foundations Toolkit, Whole Health Coaching, and Whole Health: Change the Conversation.

As of December 2016, PIRE/UW teams have presented the Change the Conversation course 52 times to over 2,200 VHA clinicians nationwide. It is changing practice behaviors, according to an October 2016 article published in female-www.ncbi.nlm.nih.gov/pubmed/?term=27740671). Under the leadership of Dr. Adam Rindfleisch, Medical Director for UW Integrative Health, the course has been recently modified and renamed Whole Health in Your Practice (WHYP). It will be offered an additional ten times in fiscal year 2017.

The Whole Health Coaching (WHC) course has been offered 30 times since 2013 and recently surpassed 1,000 graduates. Under the 2016 contract, the VA WHC course was approved as a transitional health coach program and close to 300 attendees have passed the practical skills assessment in their pursuit of health coach certification through the National Consortium of Health and Wellness Coaches.

The Whole Health Foundations Toolkit is available to all VA staff via the VA SharePoint site. The UW team also developed supplemental online material to help clinicians better understand and implement the whole health model. The peer-reviewed curriculum contains 35 evidence-based educational modules and over 200 point-of-care clinical tools. These and other PIRE/UW developed materials can be found at http://projects.hsl.wisc.edu/SERVICE/curriculum/index.html.

Advanced Courses Offered

Last year, the UW Integrative Health team developed and piloted two advanced whole health education programs for the VHA.

In one program, "Whole Health for Pain and Suffering: An Integrative Approach," clinicians learn complementary approaches to pain care, including manual therapies, acupuncture, nutrition and mindbody techniques. They also reflect on their own whole health needs, which can help lessen their risk of burnout while caring for patients in



pain. "Because of the widespread national concern around opioid use in the United States, this course has proven to be especially timely," explains Adam Rindfleisch, MD, who leads the project for the UW. "Complementary and integrative health is specifically mentioned in the recently-passed Comprehensive Addiction and Recovery Act (https://www.congress.gov/bill/114th-congress/senate-bill/524/text) as a required part of clinical and educational initiatives related to opioid prescribing at the VHA."

The other UW-developed program, "Personal Health Planning in Your Practice: Making It Real," helps clinicians and teams understand the role of personal health planning in the co-creation of health and well-being and how to implement it in the clinical setting.

Project Director David Rychener, Ph.D. piloted a third advanced course last year. It was part of a new VHA initiative - Whole Health Pathways. In the Pathways model, seven "design" sites were selected to explore options for introducing Veterans to whole health. Dr. Rychener trained VHA staff, clinicians and Veteran volunteers from these 7 sites as Whole Health Group Facilitators to lead 9-week sessions for Veterans. Under the 2017 contract, eleven more sites were added to the Whole Health Pathways program and another six training sessions will be offered.

Three new advanced courses will be piloted this year as well. The UW will lead the effort along with subject matter experts from the VHA in developing a course focused on whole health and nutrition. The second course will be a collaborative effort between Dr. Rychener and Dr. Rindfleisch to develop a two-day course that highlights the key elements of the coaching and clinical courses. The third pilot will involve development of several delivery options for the Facilitated Groups program in use by the Whole Health Pathways sites.

Complementing all of the advanced courses is an online component developed in collaboration with MicroAssist and PIRE/UW. Four online courses were completed last year and additional courses are planned for this year. Eventually, all the courses will be available to the public via TRAIN (an online VA learning platform).

Evaluation is Critical Component to Contract Success

Louisville Center Staff (Bill Scarbrough, **Kathy Atwood**, **Melissa Abadi** and **David Collins**) are valued members of the PIRE team working on the VHA contract and involved in the evaluation of all educational offerings developed by PIRE and our subcontractors. Using the Kirkpatrick Four-Level Training Evaluation Model as a framework, and a pre-/post-/3-month follow-up measurement approach, each of the courses is evaluated for Level 1 (knowledge), Level 2 (satisfaction), and Level 3 (behavior) outcomes. Year 1 data is currently being analyzed and prepared for reporting. While the advanced courses and online courses are conducting evaluation, the largest effort is focused on the clinical (Change the Conversation), coaching and the Whole Health Facilitated Groups (WHFG) programs.

Preliminary findings for the Whole Health: Change the Conversation course outcomes (pre to immediate post at seven sites) show statistically significant increases in:

- Positive Attitudes towards Integrative Medicine (7 out of 7 sites);
- Intentions to Engage in WH Behaviors (7 out of 7 sites);
- Intentions to Discuss the Circle of Health (6 out of 7 sites);
- Self-Efficacy to Engage in WH Behaviors during clinical encounters (7 out of 7 sites);
- Preparedness to Engage in Discussions about Non-pharmaceutical Approaches to Care (6 out of 7 sites);
- Self-Efficacy to Discuss Components of the Circle of Health (5 out of 7 sites);
- Empathy (5 out 7 sites); and
- Mindful Awareness (2 out of 7 sites).

There were no statistically significant changes found for Burnout (1 site decreased pre to post, 1 site increased pre to post, no significant change at the other 5 sites). OPCC&CT wanted to increase the number of MD/DO providers attending the course and modifications were made early on in the year. Following this change, stratified analyses were conducted for MD vs. all other occupational roles. Findings for both groups were similar to the above.

Comparable to the Change the Conversation course, the Whole Health Coaching course also saw statistically significant increases in outcomes (pre to immediate post from four4 sites) in:

- Preparedness for Whole Health Coaching (4 out of 4 sites);
- Self-Efficacy to Use Whole Health Coaching Skills (4 out of 4 sites);
- · Attitudes toward Patient Driven Care (3 out of 4 sites);
- Institutional Support for Patient Driven Care (2 of 4 sites).

The third program evaluated, and perhaps the most challenging, is the Whole Health Facilitated Groups (WHFG). In 2016, pre- and post-test surveys were administered at three trainings: Newark, New Jersey (March), Fort Worth, Texas (May), and Salisbury, North Carolina (August). The sample comprised 42 participants who completed the training at one of these sites. Participants ranged from VHA providers to Veteran volunteers. Courses were delivered at the Pathway Design Sites only and were led by either VHA staff or Veteran volunteers following their training. The challenge with this evaluation is the length of time between training and delivery of the first on-site program. Follow-up data was collected as facilitators completed their first facilitated group with Veterans and focus group data from the trainings is currently being coded. Participants report high satisfaction with the course, content quality, trainer quality, and course utility. Again, parallel to other courses, the WHFG also saw <u>statistically significant</u> increases in outcomes (Pre to Immediate Post from three sites) in:

- Preparedness to lead/ facilitate group session with peers (3 out of 3 sites);
- Knowledge of WH skills and tools (3 out of 3 sites);
- Self-efficacy to lead/ facilitate group session with peers using the tools and strategies in the training (3 out of 3 sites);
- Attitudes about the importance of group programs (1 out of 3 sites);
- Intentions (1 out of 3 sites).

With the distribution and collection of 90-day post course evaluations, final reports for the FY 2016 courses will be written and submitted to OPCC&CT.

Whole Health for the VHA's Future

In October 2016, following the award of the Option Year 1 contract, VHA Office of Patient Centered Care and Cultural Transformation (OPCC&CT) Executive Director, Tracy Gaudet, MD, along with other representatives from the VHA and PIRE, visited the UW Department of Family Medicine and Community Health to talk more about how the whole health model represents a "radical redesign" in health care—and how the VHA is embracing this shift.



In her presentation https://www.youtube.com/watch?v=1jyxQPdPefw), she explained the ways the Whole Health model is currently being implemented at the VHA, and cited a New England Journal of Medicine

<u>article (https://www.ncbi.nlm.nih.gov/pubmed/26981931)</u> affirming that the model is a key component of the VHA's proposed future delivery system.

Dr. Gaudet emphasized that human care, self care and clinical care are equally critical to improving patient empowerment, Veteran satisfaction, access, outcomes and costs—and fostering trust. She also noted that the Whole Health approach extends into establishing relationships throughout the community.

"The role that we are together playing in creating that future is exciting," she expressed.

Also in October, the directors of the 18 VHA networks across the U.S. initiated a bold plan to establish whole health demonstration sites in each region in fiscal year 2018. VHA OPCC&CT is actively developing the education plan to meet this expansion. PIRE and UW will continue to play a critical role in developing and delivering curriculum, and training representatives from these regions how to apply the whole health approach in their practices and personal lives.

SPOTLIGHT

Calverton Staff tour the Prince George's (PG) County Police training facility

On February 7, several PIRE Calverton Staff were invited to tour the Prince George's (PG) County Police training facility. The invitation grew out of on-going conversations that Mary Gordon has been having with the department as she prepares to implement the National Institute of Justice award. The photos below capture the group, who were led on a tour by Major Terence Sheppard. Simulations and demonstrations were conducted by new recruits as part of their hands on training.



From left to right: Eduardo Romano, Captain Stephanie Frankenfield, (Assistant Commander Training and Education Division), Mary Gordon, Bernie Murphy, Rebecca Ramirez, Colleen Copple (SAI, Inc.), Eileen Taylor, Anthony Ramirez and Major Terence Sheppard.

Mary was also able to test her lethal force judgement skills in a training simulator. P. G. County Police Department, the 24th largest department in the U.S., is most proud of their high-tech equipment and comprehensive training program. We look forward to continuing to build a working relationship and partnering with the P.G. County Police Department.



ANNOUNCEMENTS

Farewell Robin – We wish you well!



Robin Pollini has accepted a faculty position at West Virginia University and is tentatively planning to depart PIRE at the end of March. West Virginia has a serious opioid abuse problem – perhaps one of the worst in the country. Robin is looking forward to continuing her research and making a direct impact on that public health problem. All the best, Robin, and thank you for your contributions while at PIRE.

Retirement of Jenny Ames



On January 17,2017 many of the PRC Staff and PIRE's CEO, joined at the Lake Merritt Boat House in Oakland, CA to honor and celebrate Dr. Genevieve Ames. Jenny is retiring from PIRE after over 34 years of service.

Following a beautiful luncheon, Roland Moore and Bernie Murphy presented Jenny with



gifts of crystal bookends and a memory book containing scores of letters from colleagues within and outside of PIRE. There was also a plaque of appreciation from the PIRE Board of Directors, where Jenny served as Staff Director from 2003 - 2008.

Staff Development Awards – DEADLINE: February 28, 2017



PIRE is committed to increasing the capacities and career potential of its junior and mid-level Staff. Our goal is to hire and retain the most skilled, creative and expert Staff we can find in all areas. We wish to maintain a climate and culture that encourages Staff to make PIRE their career home. The number of awards is based on available funds. Each award will be based on actual costs, but will not exceed \$2500 per award.

PLEASE REVIEW THE ELIGIBILITY CRITERIA AND TYPES OF ACTIVITIES CAREFULLY

- · Recipient must have demonstrated a commitment to PIRE and its mission
- Recipient must be benefit eligible PIRE staff at Staff Levels I-V. The skills or experience gained from the use of this
 award must demonstrably advance the recipients' career potential and PIRE's capacity
- Application forms must include a justification and budget, and be approved by the immediate Supervisor and the Center Director
- Under extraordinary circumstances, the maximum award amount may be increased, either directly from corporate funds or through matching funds from Center overhead.

DETAILS

APPLICATION FORM

The Chapel Hill Center has moved!

Please note new address effective February 4, 2017:

101 Conner Drive, Suite 200 Chapel Hill, NC 27514-7038



Please update your PIRE Staff Information today

Staff can go online and update their own profile on PIRE's website. From http://company.pire.org select 'Modify Staff Information.' Then select the option to either update General Information & Bio, Staff Expertise, Projects, or request corrections to your Publications. Updating Staff Expertise allows you to choose your expertise, so that when staff are looking for other staff to help with a specific project, the staff members with that particular expertise will be listed. Once you have made your selection you need to log in by entering your employee id and your six digit birthdate. After you save your changes within any section you will be taken to a menu that allows you to access the other staff modification areas. In order to update your resume or picture you will need to email them to dacanay@pire.org.

Your staff information can be viewed at http://www.pire.org/staff.aspx. Bios and resumes for researchers and practitioners can be viewed at http://company.pire.org/Internal/staffcap.asp, while administrative staff responsibilities in the Calverton office can be viewed at http://company.pire.org/Internal/areasresp.asp.