

"In a laboratory on this site in the period 1961-1963 Dr. E. Donnall Thomas, together with Dr. Joseph W. Ferrebee, Dr. David A. Blumenstock, and a team of others conducted some of the early tests of bone marrow transplantation which culminated in the awarding of the Nobel Prize

Frederick Appelbaum MD Executive Vice President and Deputy Director, External Affairs, Fred Hutchinson Cancer Research Center Member, Clinical Research Division

Member, Clinical Research Division Professor, Division of Medical Oncology, University of Washington

Presented IDGR 7/17/19 on the history of bone marrow transplantation starting at the BRI











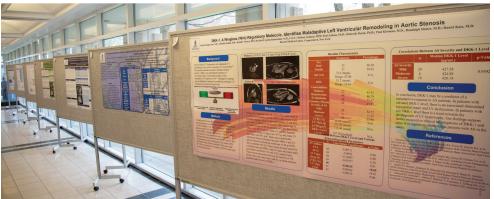
THE BASSETT RESEARCH INSTITUTE (BRI)

2019 YEAR IN REVIEW

"We do clinical and rural community health research, program evaluation and education"









The Bassett Research Institute Mission "The Bassett Research Institute conducts research to understand and improve the health and well-being of individuals and rural populations. We develop strategies to improve health care delivery, prevent illness and manage chronic disease in support of the Bassett Healthcare Network's mission."

Web Site: https://www.bassett.org/research-institute Email: research.institute@bassett.org

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A NOTE FROM OUR DIRECTOR



I am pleased to present you with the BRI 2019 Year in Review. We have had another successful year in research thanks to the individual and team efforts of the BRI. We continue to develop our team science and multi-disciplinary approaches to community and population-based research questions. This report summarizes those approaches and projects that range from setting up a System of Care to improve mental health for youth in Otsego County to tackling chronic disease self-management in our Living Well Program.

In a July 2019 visit that made us fully appreciate the legacy of the BRI, we hosted Dr. Frederick Appelbaum, Executive Vice President and Deputy Director Fred Hutchinson Cancer Research Center. Dr. Appelbaum, who worked for Dr. E. Donnall Thomas in Seattle years ago, is writing a book on the history of bone marrow transplantation. He came to the BRI to research the beginning days of bone marrow transplantation that started at the BRI. At Interdepartmental Grand Rounds, he presented a wonderful retrospective on the history of bone marrow transplantation titled "Progress in the Clinical Art of Hematopoietic Cell Transplantation", a talk that inspires us to continue to build the legacy of the BRI.

The BRI expanded its research capacity in 2019 with the addition of three new research scientists. In July 2019, we welcomed Wendy Brunner PhD as Deputy Director of the Center for Rural Community Health. As an epidemiologist, she brings a valuable perspective to our multidisciplinary work at BRI. Soon after her arrival, as vaping related illness and deaths were increasing across the US, she immediately started tracking this new epidemic of Evali (e-cigarette or vaping product use associated lung injury). In October 2019, she presented a fantastically well-organized chronology of the vaping epidemic at our Research Grand Rounds. She later wrote a piece for the local media to explain this complicated epidemic to the general public. She is currently involved in multiple research projects addressing chronic disease self-management, COPD, and school based health clinic utilization, working on several grants and drafting manuscripts.

In October 2019, Pam Tinc successfully defended her PhD at Umea University in Sweden. Her PhD process led to five publications. Her dissertation, titled "Raising the (roll)bar: exploring barriers and facilitators to research translation in US public health" focused on the implementation science of Rollover Protection Structure (ROPS) Rebate Programs. The National ROPS program promotes the use of rollover protection on agricultural tractors in order to reduce the risk of tractor overturn fatalities. In December 2019, the newly minted Dr. Tinc had two presentation at the annual Academy Health Implementation and Dissemination meeting in Arlington, VA. One was a poster on the impact of media advocacy on the ROPS Rebate Program and the other was an oral presentation titled "Applying the CFIR to the Implementation of a Center of Excellence in Transgender Health" (see CERI page 27).

In December 2019, after completing her field work on the Lifejackets for Lobstermen Project, Amanda Roome PhD joined the BRI to start a tick-borne disease research program. Dr. Roome is focusing on finding ways to develop and implement mitigation and prevention strategies to reduce human risk and increase awareness of tick-borne disease. Dr. Roome has a few abstracts accepted for poster presentation at the Human Biology Association Annual Meeting in LA in April 2020.

NYCAMH/NEC continues to be amazing in terms of its productivity applied to a broad range of research in occupational injury prevention for farmers, fishermen and loggers. I encourage you to look at their 2019 Year in Review to appreciate yet another impressive example of team science and multidisciplinary collaboration.

Together with NYCAMH/NEC, 2019 ended with 40 BRI publications, up from 32 last year (see page 47). Not only that, but we had an additional seven in press at the close of 2019, for a total of 53. With pride, we display these publications as well as our media coverage on a clothesline on the bulletin board on the fourth floor of building 6. Come take a look!

Anne Gadomski MD, MPH

BRI Director, anne.gadomski@bassett.org

INSTITUTIONAL REVIEW BOARD (IRB)/ OFFICE OF SPONSORED PROGRAMS (OSP)











Who We Are

Chair, IRB: David Strogatz, PhD

Program Manager, IRB: Heidi Johnson, CIP

Coordinator, IRB: Christen Turner, BS

Administrative Director: Stephen Clark, BS Business Manager: Melinda Hasbrouck, MBA

The **Institutional Review Board (IRB)** is comprised of eleven voting members and eleven alternate members of varying backgrounds, in addition to the Chair and Vice-Chair of the Board. The Board is charged with providing a complete review of research activities commonly conducted by investigators within the Network. The Board meets at least once per month on the first Tuesday of every month. It is responsible for conducting an initial review process, a continuing review process and for maintaining a record of all IRB activities, in accordance with the HHS regulation for the Protection of Human Subjects as defined by the Code of Federal Regulations (45 CFR 46 and 21 CFR 50, 56).

At the end of 2019 there were 110 active protocols approved for research activities within the network. During 2019 twenty-three new protocols were approved, 9 of which were clinical trials and 14 of which were non-experimental studies analyzing existing datasets or using qualitative or qualitative methods for collection and analysis of primary data. Forty protocols were completed and terminated in the course of 2019. This year also marked the first opportunity for the IRB Office to serve as the single IRB of record for a multi-site study; this project is being led by Bassett investigators and involves co-investigators from collaborating institutions and study sites in Virginia, North Carolina, Oregon and Alaska.

In 2018 the IRB Office adopted the IRBNet suite of tools, accessible via the National Research Network, bringing electronic protocol management, on-line submissions and many other important research oversight features to the Bassett Healthcare Network research community. Another significant transition during 2018 was the change in training and certification for ethical conduct of research. The NIH Protecting Human Research Participants training course was no longer available after September 26, 2018 and was replaced by the online Human Subjects Research courses of the Collaborative Institutional Training Initiative (CITI) Program. The transition period has been successful and has included occasional modification of forms and protocols with the support of IRBNet.

The Research Office of Sponsored Programs (OSP) supports the submission of all Research grant applications and assists as requested with non-research applications for the organization. The Research OSP provides support and guidance to Research Principal Investigators for all phases of post award management, including management of contracts and sub-awards, quarterly and annual reporting and grant close out. The Research OSP monitors and maintains all state and federal grant submission and tracking platforms and assures that the organization remains in compliance with all state and federal regulations as they pertain to grant supported programs. The following page is a list of grant applications submitted for 2019.

OSP GRANT APPLICATIONS SUBMITTED IN 2019

Granting Agency	Application Title	Principal Investigator	
CDC-National Institute of Occupational Safety and Health	Surveillance of Agricultural Injuries and Illnesses – National Implementation Research (Bassett Sub award, primary University of Nebraska Medical Center)	Erika Scott	
Centers for Disease Control and Prevention – ERA	Implementing ROPS Programs: Key Factors in OSH Evidence-Based Practice Adoption	Julie Sorensen	
HRSA	Small Health Care Provider Quality Improvement Program	David Strogatz	
HRSA	Living Well Rural Health Care Collaborative	David Strogatz	
HRSA	Advanced Nursing Workforce Education	Greg Rys	
HRSA	Bassett Nurse Practitioner Residency Program	Greg Rys	
National Institute of Arthritis and Musculoskeletal and Skin Diseases	Group acupuncture: SMART non- pharmacological intervention for chronic low back pain	Julie Sorensen	
National Institute of Occupational Safety and Health, U.S. Coast Guard	Economic Assessment of the Northeast Groundfish Fleet and Implications for Vessel Safety	Julie Sorensen	
National Science Foundation	Vessel Safety App Technology Translation	Julie Sorensen/Leigh McCue-Weil	
NIH – NICHD	The impact of HAI on typical and atypical child development and health	Anne Gadomski	
NIH – NICHD	Children and pet loss: reorganizing the bonds between children and their pets	Bonita Gibb	
NIH – Centers for Disease Control and Prevention	Assessments of Sleep Deprivation and Associated Health and Cognitive Impacts in Commercial Fishermen	Julie Sorensen	
NIH – Centers for Disease Control and Prevention	Examining Associations Between Quota Restrictions and Northeast Groundfish Vessel Safety and Safety Equipment: An Economic Assessment		
NYS Health Foundation	Multi-Institutional Peer Support for Central NY clinicians (MIPS-CNY)	Caroline Gomez-DiCesare	
Robert Wood Johnson Foundation	An implementation science approach to assessing the role of cross sector alignment in providing equitable access to the Diabetes Prevention Program	Pamela Tinc/Wendy Brunner/ Kristin Pullyblank	
University of Baltimore	Effectiveness of primary care management of opioid use disorder	Anne Gadomski/James Anderson	

CENTER FOR RURAL COMMUNITY HEALTH

The Center for Rural Community Health was established in 2011 to work with academic partners, state and local public health resources and Bassett health professionals across the region to better understand the serious health challenges affecting the people in Bassett's catchment area and to design and test community-based strategies to address these challenges. In seeking to enrich health access and opportunities for individuals, the Center was also charged to look to surrounding health and social service resources as well as schools and local businesses to see what infrastructure already exists and can be built upon in collaboration with the Center. Major projects of the Center in 2019 reflect its ongoing commitment to these goals, with programs that notably span the full age range.

Who We Are

Senior Research Scientist: David Strogatz, PhD

Health Promotion Disease Prevention Specialist: Thomas Hohensee, MA

Senior Health Educator: Lynae Wyckoff, MS

Supervisor Rural Health Education Network:

Kristin Pullyblank, MS, RN

Health Educator Community Health Services:

Carleen Henderson; Alexis Bloomfield, MS

Community Health Project Coordinator:

Christine Burrington, BS

Research Coordinators:

Ida Baker, MA; Andrew Johnson, BS

Research Assistant: Jennifer Flynn, MS; Pamela McCabe, BS; Melinda Robinson, BS

CENTER FOR RURAL COMMUNITY HEALTH PROGRAMS:

- I. 5210
- II. Creating Healthy Schools and Communities (CHSC)
- III. RHENSOM
- IV. Living Well
- V. LongROAD
- VI. Strong Hearts, Healthy Communities



I. 5210 Every Day! LEAD: Christine Burrington, BS

5-2-1-0 Every Day! is modeled after 5-2-1-0 Let's Go initiated in Maine to help kids and families eat healthy and be active. An important feature of the program from Maine is its emphasis on partnering with six sectors of the community: preschool, school, after school, worksites, healthcare, and community groups to give a consistent message to kids and their families about a healthy lifestyle.

The BRI began a pilot version of the 5210 program in two communities in 2013, Delhi and Edmeston, where the presence of school-based and community-based health centers, as well as a history of engagement in wellness issues with schools, worksites and community groups was already established. The program was extended to two more communities, Morris and Cobleskill, in 2015. To enlist the help of all sectors in the 4 communities, mini-grants in the amount of \$200-\$2000 were offered to stimulate sustainable activities that promote the goals of 5210.

Coordinating with Edmeston's Pathfinder Village (a center for training young adults with intellectual and developmental disabilities), a Fruit and Vegetable Prescription (F&VRx) Program was piloted with favorable results. In Morris and Edmeston, families who qualified for Free and Reduced Lunch with 1 or more children with chronic disease related to obesity were given \$15-\$25 per week to order fresh produce online from the Pathfinder Produce Market. Cooking/nutrition classes introduced the use of new fruits and vegetables into the menu. Redemption of the produce vouchers was 94%, fruit and vegetable consumption increased, and cooking confidence rose. Partnering with SUNY Cobleskill, another F&VRx Program is being offered to families in the Cobleskill-Richmondville School district. A Mobile Market, created and coordinated by Pathfinder Village, will provide an expanded version of the F&VRx program to Medicaid residents of Otsego County. A manuscript describing this F&VRx Program was accepted for publication in December 2019.

Encouraging kids to cook continues to be a focus of 5210. In Cobleskill, activities included a Junior Iron Chef Competition for Golding Middle School students and making Chicken Zoodle Soup with the 3th graders for Enrichment Day at Radez Elementary School. At Morris Central School, the greenhouses were upgraded with a new irrigation system and the cafeteria has winter herb towers. Altering the environment to provide access and skills to use fruits and vegetables makes for sustainable behavior change.





This research is funded by Stephen C. Clark Foundation.







II. Creating Healthy Schools and Communities (CHSC) LEAD: Thomas Hohensee, MA

The Center for Rural Community Health has entered the final year of a five year public health initiative – Creating Healthy Schools and Communities (CHSC) – funded through the New York State Department of Health (NYSDOH) to reduce major risk factors for obesity, diabetes, and other chronic diseases. The grant is one of 25 statewide projects working in 85 high-need school districts and associated communities statewide. We are conducting this work in partnership with the grant's lead agency, the SUNY Cobleskill Research Foundation. Our goal is to implement multi-component evidence-based policies, place-based strategies, and promising practices to increase demand for and access to healthy, affordable foods and opportunities for daily physical activity in five regional school districts and surrounding communities.

School strategies include:

- 1. Revise, implement, and assess local wellness policies to improve the school environment.
- 2. Establish Comprehensive School Physical Activity Programs (CSPAP).
- 3. Increase access to healthy, affordable foods and increase school districts' ability to meet federal **Healthy**, **Hunger-Free Kids Act of 2010 nutrition standards for foods sold.**
 - a. outside of school meals.

Community strategies include:

- 1. Increase access to healthy, affordable foods in communities.
- 2. Increase adoption and use of **food standards and procurement policies that increase healthy foods** in community sites and settings.
- 3. Adopt and implement Complete Streets policies, plans, and practices to increase access to **opportunities to walk, bike, and roll.**

The grant is supported by the **Obesity Prevention Center for Excellence (OPCE)**, led by **JSI Research & Training Institute**, **Inc. (JSI)** to strengthen the CHSC initiative's collective impact by providing technical assistance, training, resources, and a network to collaborate. School Coordinator Tom Hohensee served on a grant Advisory Group to assist JSI with identifying effective grant training and resource needs.

Grant funding continues to provide technical assistance, training and resources to wellness teams in promoting school and community wellness. This year grant funds supported school wellness policy upgrades, attendance at the NYS Association for Health, Physical Education, Recreation and Dance conference for physical educators and provided supplies and equipment to support grant objectives. School districts received standing desks for middle and high school students, sensory trails and high tunnels and school garden equipment.

The CHSC grant facilitated work with the town of Davenport and the NYS Department of Transportation to install radar speed signs and create other traffic calming measures to improve traffic and pedestrian safety. The grant provided leadership for the 6th annual Junior Iron Chef Competition at SUNY Cobleskill and supported a Kids Cook Wednesday program at Charlotte Valley Central School.









Judges for sixth annual Junior Iron Chef Competition at SUNY Cobleskill



Fresh fruit and veggie promotion – Richfield Springs CS



Preparing and taste testing apple sauce – Sidney Elementary



Sidney Elementary School Sensory Trail



Kids Cook Wednesday at Charlotte Valley CS



Bike Rack – Richfield Springs Central School



Sidney Farm to School poster with Elementary students



NYS Senator James Seward on the Smoothie Bike – Charlotte Valley CS



III. Rural Health Education Network of Schoharie, Otsego and Montgomery Counties (RHENSOM) Lead: Kristin Pullyblank, MS, RN

Rural communities are enmeshed in a vicious cycle of resource scarcity, poor health outcomes, lost productivity and lack of economic growth. Through collaboration with community organizations, county health departments, healthcare systems, and with funding from NYS DOH, the **Rural Health Education Network of Schoharie, Otsego and Montgomery Counties (RHENSOM)** is dedicated to serving the health needs of communities through innovative, evidence-based programming and initiatives. RHENSOM secured a new five year contract from NYS DOH, which began in January 2019. Two key areas of work focused on addressing health disparities associated with chronic disease and empowering healthcare professionals and youth to be more engaged in creating a healthy environment.

Highlights from 2019:

Prevent and Manage Chronic Disease

- Subcontracted with Cornell Cooperative Extension to fund an additional nutrition educator for the region, a resource that was sorely lacking in our area. This additional educator has reached 280 individuals (including seniors, young adults, and individuals in recovery).
- Supported Pathfinder Village's Mobile Market, an invaluable service providing weekly fresh fruit and vegetables, as well as nutrition education information, to 100 families.
- Provided staff and financial support to lead the region's first National Diabetes Prevention Program with year-long workshops beginning in Amsterdam, Cobleskill and Cooperstown.
- Continued support of the Living Well program (see section 11), focusing on strengthening communityclinical collaborations and implementation of the evidence-based self-management programs.
- Collaborated with Schoharie County Office for the Aging to provide A Matter of Balance training.

Engagement in Improving the Healthcare Environment

- Provided staff support for the UpClose Cardiac Surgery Program in collaboration with the Bassett Department of Surgery. This program educates nearly 1000 students a year on the importance of establishing heart-healthy lifestyle behaviors early in life.
- In March, supported the Jr. Iron Chef Competition where 24 middle school and high school teams from the region traveled to SUNY Cobleskill for the championship cook-off.
- In October, RHENSOM organized and facilitated the annual School Nurse Symposium which featured the Advancing Tobacco Free Communities Teams from Schoharie, Otsego, Delaware counties and Hamilton, Fulton and Montgomery counties. Their presentation on Combatting Vaping in the School Setting was well received by 40 school nurses and allied health professionals.



The Living Well Program began in 2016 when Bassett Medical Center received a three-year Quality Improvement grant (August 1, 2016 – July 31, 2019) from the Health Resources and Services Administration (HRSA) to utilize the evidence-based Diabetes Self-Management Program (DSMP) and Chronic Disease Self-Management Program (CDSMP) developed by the Stanford Patient Education Research Center, now known as the Self-Management Resource Center, as the framework for QI in eight clinic sites. In support



Living Well Participants

of the Bassett Research Institute's mission to improve health care delivery and manage chronic conditions, the Center for Rural Community Health (CRCH), collaborated with health center operations to oversee participant recruitment and implementation and evaluation of the Living Well Program. Positive initial findings for measures of process and short-term outcomes led to additional funding, program expansion and an extension of HRSA QI funding through January 2020 to provide additional data for evaluation.

The Mohawk Valley Population Improvement Program (MVPHIP), the NYS Office for the Aging, the Leatherstocking Collaborative Health Partners, and Excellus have been instrumental in supporting peer leader trainings, workshop materials, and additional staff time to expand the Living Well Program outside of the HRSA-designated rural communities and primary care clinic sites. In addition, the CRCH received a three-year HRSA Rural Health Care Services Outreach Program award (June 1, 2018 – April 30, 2021) to add the Chronic Pain Self-Management Program (CPSMP) as part of the Living Well Program.

Unique to the self-management programs offered by the CRCH are an "extra" seventh session, wherein DSMP participants meet with a diabetic nurse educator, CDSMP participants meet with a nutritionist, and CPSMP participants begin developing a "Wellness Recovery Action Plan". During the seventh session participants also have the opportunity to enroll in the self-directed, evidence-based Walk with Ease program developed by the National Arthritis Foundation.

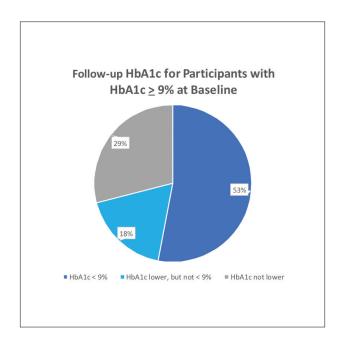
Each 7-week program is facilitated by two trained peer leaders who have a chronic condition or have a close connection to someone who does. Peer leaders convene small groups of 8-16 participants once a week for 2.5 hours in a community setting. Peer leaders are recruited by and/or are staff of collaborating regional rural health networks, including RHENSOM, local county Offices for the Aging, and affiliate hospitals. The Living Well Program offerings and partnerships also support each affiliate hospital's NYSDOH Community Service Plan and IRS Community Benefit requirement (Section 501(c)(3) of the Internal Revenue Code).



In the spring and fall of 2019 additional peer leaders were trained and certified over a 6 day period to lead the CDSMP, DSMP and CPSMP for programs offered within the Bassett region. Over the course of three years, 34 DSMP, 29 CDSMP, and 25 CPSMP workshops have been held. This regional approach to chronic disease management has led to 247 participants completing CDSMP, 356 completing DSMP, and 211 completing CPSMP by the end of 2019.

# of Self-Management Workshops from 2017-2019					
	2017	2018	2019		
DSMP	8	13	13		
CDSMP	8	11	10		
CPSMP	0	9	16		

Among the DSMP participants with HbA1c > 9% at Baseline, 53% lowered their A1c below 9 after completing the workshop.



The Living Well program is funded by the Health Resources and Services Administration, DHHS grant #G20RH30132 and New York State Department of Health Contract #D0H01-C028715



The reason DSMP is working is best described by one of our participants:

"Whether a newly diagnosed diabetic or someone who has had diabetes for years, this course will keep you updated and aware of ways you can help yourself maintain a healthy lifestyle."

Participants continually report a supportive group atmosphere is a key component of the self-management programs. Significant improvement (p=0.0005) in Patient Activation Measures (PAM) were found among our CDSMP participants. One of our participants best summarizes some benefits of CDSMP:

"Well rounded program that offers a wide view of managing your illness. It makes you think about multiple ways of dealing with it. Helps to know you're not alone."

Successes of CPSMP are demonstrated by self-reported pre/post data obtained in the self-efficacy for pain management survey and in the words of our participants:

"I found the group setting to be very beneficial. I came into this having a pretty good grasp of pain management. Turns out I learned even more by benefitting from others' experiences."

% UNCERTAIN ABOUT SELF-EFFICACY FOR MANAGING PAIN: CPSMP COMPLETERS, FALL 2018, SPRING 2019			
Item	Pre - CPSMP	Post - CPSMP	
Continue most activities	31%	23%	
Decrease pain quite a bit	31%	27%	
Keep pain from interfering with sleep	48%	34%	
Reduce pain by methods besides extra Rx	34%	12%	



Additional resources and support introduced in 2019 for Living Well participants included Living Well Monthly (for e-participants), Living Well Quarterly (offered by mail) and the Bassett Living Well Facebook Page.



Figure 1: Living Well Monthly Email livingwellsessions@bassett.org to enroll

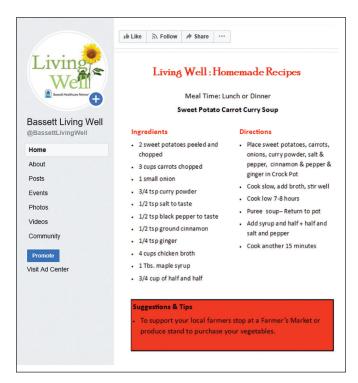


Figure 2: Living Well Facebook Page www.facebook.com/BassettLivingWell/

In November of 2019, Kristin Pullyblank, Junior Research Scientist, and members of the Living Well team applied for the HRSA Rural Health Network Development Program. The Living Well Rural Health Care Collaborative, a network of safety-net and non-safety-net providers, proposes to use Collective Impact to systematically expand its programmatic offerings and strengthen its structure to position itself for community-based prevention program reimbursement from third-party payers. Notice of funding is expected in June of 2020.

The goals for 2020 include continuing to contribute to BRI's mission of understanding and improving the health and well-being of individuals and rural populations through publications and presentations; organizing and conducting secondary studies and analyzes; sustaining the self-management programs; and expanding the evidence-based Living Well program offerings.

The Living Well program is funded by the Health Resources and Services Administration, DHHS grant #G20RH30132 and New York State Department of Health Contract #D0H01-C028715



V. The Longitudinal Research on Aging Drivers (LongROAD) Study



Who We Are

Senior Research Scientist: David Strogatz, PhD **Research Coordinator:** Andrew Johnson, BS

Research Coordinator: Ida Baker, MA **Research Assistant:** Pamela McCabe, BS

The Longitudinal Research on Aging Drivers (LongROAD) Study is a multi-site cohort study of factors that predict the ability of older adults to continue driving safely (and factors that preserve quality of life when older adults reduce or discontinue driving). The LongROAD Study is funded by the American Automobile Association Foundation for Traffic Safety and enrolled 2,990 65-79 year old adult drivers between August 2015 and March 2017 at five sites (Cooperstown; Baltimore MD; Denver CO; Ann Arbor MI; San Diego CA). The study's lead institution for data management is the Mailman School of Public Health of Columbia University, and other participating institutions besides the Bassett Research Institute are the Johns Hopkins University, the University of Colorado, the University of Michigan Transportation Research Institute and the University of California at San Diego.

Each of the five sites enrolled approximately 600 study participants from local primary care or specialty clinics and conducts full or limited follow-up assessments in alternating years. Information collected includes detailed measurements of physical and cognitive functioning; health conditions and medications; the condition and safety features of participants' vehicles; and driving-related behaviors. Data sources include in-person interviews and examinations; medical and motor vehicle department records; and GPS measurements of driving patterns from devices installed in each participant's primary vehicle or from an app installed on the participant's mobile phone. With the support of primary care providers, we recruited Bassett study participants from the primary care health centers in Cherry Valley, Cobleskill and Cooperstown and completed baseline assessments in March 2017.

The first peer-reviewed publication about the LongROAD Study appeared in 2017 in the journal *Injury Epidemiology* and the first symposium on the study was held in July 2017 at the World Congress of the International Association of Gerontology and Geriatrics in San Francisco, CA.



V. The Longitudinal Research on Aging Drivers (LongROAD) Study

During 2019, nine manuscripts with findings from the LongROAD Study have been published or accepted for publication on topics such as

- the prevalence and use of in-vehicle technologies
- use of potentially inappropriate medication by older drivers
- factors related to rapid deceleration events among older drivers
- how levels of physical function and physical activity are related to self-regulatory driving practices and motor vehicle crashes
- the degree to which older adult drivers have discussions with family members and health care providers about driving safety

Cooperstown was included as a LongROAD Study site in order to provide comparison of the characteristics and driving experience for older adults from rural and urban environments. Results published in the *Journal of Rural Health* in 2019 showed that rural drivers assigned greater importance to driving and predicted greater impact that driving cessation would have on their lives. Dr. Strogatz also addressed the rural-urban contrast while representing the LongROAD investigators in a panel presentation entitled "Problems and Solutions for Rural Older Drivers" at the annual Lifesavers Highway Traffic Safety Conference in Louisville, KY in 2019. Ongoing analyses will assess differences in the predictors of driving behaviors and outcomes for the rural and urban participants in the LongROAD Study.













VI. Strong Hearts, Healthy Communities LEAD and Principal Investigator: David Strogatz, PhD



The Bassett Research Institute collaborated with Cornell University in conducting Strong Hearts, Healthy Communities (SHHC), a study to test community-based strategies for reducing risk of cardiovascular disease in rural areas of the United States. The intervention was designed for sedentary and overweight or obese women aged 40 or older, who attend exercise and nutrition classes twice a week for 24 weeks. The classes used experiential learning principles and included aerobic exercise, progressive strength training and healthy eating practices. In addition, participants developed and carried out a community engagement project to

positively affect cardiovascular health in their community. The initial phase of SHHC was a communityrandomized trial beginning in 2015 and 2016 in 16 medically underserved rural towns (12 in Montana, 4 in New York) with 194 participants enrolled. Compared to women in the control communities, women in the intervention communities experienced statistically significant improvement in the primary outcome, weight loss, at the end of the 24 week study period. The primary results from the initial phase of SHHC were published in Obesity in 2018. Additional manuscripts on results from the initial phase were accepted for publication in 2019; they describe cost effectiveness of the intervention and its effects on diet, physical activity and functional fitness.

A second phase of SHHC was conducted between March 2017 and June 2018, using lessons learned from the first phase to enhance the intervention protocol and modify the study design. In this phase the community-randomized trial was conducted exclusively in upstate New York at 14 sites in 11 medically underserved rural towns (nine in the Bassett region), with a total enrollment of 182 women. Analyses of the American Heart Association's Simple 7 score (a composite measure of cardiovascular risk) at baseline and 6 month follow-up indicated no change in the control group (randomly assigned to delayed intervention) but a statistically significant improvement for women receiving the intervention. The Simple 7 components showing the greatest improvement were BMI, physical activity and healthy diet score. These findings were presented at the 2019 annual meeting of the American Heart Association Council on Epidemiology and Prevention and have been submitted for publication.

CENTER FOR CLINICAL RESEARCH (CCR)



Anna Schworm, RN; Catherine Gilmore, RN; Jennifer Victory, RN; Peggy Cross, Research Assistant; & Julie Tirrell, RN (per diem)

Who We Are

Clinical Research Nursing Supervisor: Jennifer Victory, RN, CCRC

Clinical Researh Nurses:

Catherine Gilmore, RN, CCRC; Anna Schworm, RN; Julie Tirrell, RN, CCRC

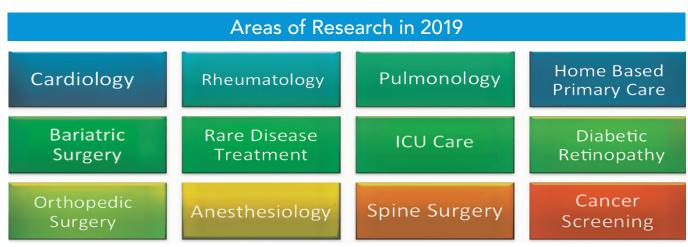
Research Assistant: Peggy Cross

Staffing Transitions - In 2019 we:

- said goodbye to Dr. Merle Myerson (relocated to Dartmouth-Hitchcock) and Arpitha Nanjappa (began her internal medical residency here at Bassett Medical Center)
- a partial goodbye to Julie Tirrell, who retired but still assists us on a per diem basis
- welcomed Peggy Cross, Research Assistant
- hosted Summer Research Intern Molly Mooney (LeMoyne College)











Who We Are

Principal Investigator: John May, MD **PHIP Supervisor:** Aletha Sprague, BA

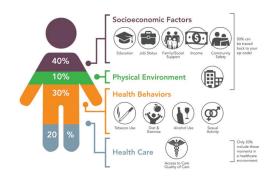
Community Health Data Analyst: Bonita Gibb, BS

Research Assistant: Barbara C. Doyle, BA

Mohawk Valley Population Health Improvement Program promotes the Triple Aim – better care for individuals, better population health and lower health care costs- through convening of community stakeholders for data-driven prioritization of health challenges. MVPHIP convenes a board and workgroups to address health priorities affecting the entire region (Fulton, Herkimer, Montgomery, Otsego, and Schoharie counties). The board and workgroups utilize evidence-based strategies outlined in the New York State Prevention Agenda, which aims to promote health and reduce health care disparities. The program also serves as a resource to the Delivery System Reform Incentive Payment (DSRIP) program's Performing Provider Systems (PPS) and State Health Innovation Plan (SHIP). The Mohawk Valley region is one of 11 regions across the state served by PHIPs that are designated and funded by the New York State Department of Health.

Regional Priorities

MVPHIP staff work on four regional priorities. These priorities address social determinants of health and aim to build environments that promote positive healthy life choices, thereby encouraging individuals to become key players in their own health. Social determinants are the conditions in which people are born, grow, live, work, and age. They include factors like income, education, employment, social support networks, the physical environment, health behaviors, as well as, access to health care.



The four regional priorities include behavioral health, obesity, opioids, and a self-management program hub. Subsequently, separate workgroups were formed to focus on each priority utilizing New York State Prevention Agenda recommended interventions.

Behavioral Health

The behavioral health workgroup requested resources related to Adverse Childhood Experiences (ACEs). MVPHIP promoted the use of the Centers for Disease Control and Prevention's Veto Violence® "Preventing Adverse Childhood Experiences" training modules as an opportunity to educate community members and decision makers. The modules include an ACEs overview and a public health approach to prevention of ACEs. In addition to the training, other resources and infographics are available on the CDC's VetoViolence® website.

(Continued on the following page)



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The workgroup continued to explore best practices and emerging practices for reducing mental health stigma. MVPHIP staff updated the workgroup on Beacon Health Options, a behavioral health company based in Boston, launching outpatient mental health therapy in retail stores called Beacon Care Services. Currently, Beacon Care Services has two locations in Walmart stores located in Carrollton, Texas and Dallas, Georgia.

MVPHIP provided technical assistance to Otsego and Herkimer counties on their Substance Abuse and Mental Health Services Administration (SAMHSA) System of Care grants. Both counties won awards of four million dollars over the course of four years. System of Care grants focus on providing wrap-around emotional, mental, and educational supports for children and their families in a variety of settings.



MVPHIP staff bridged terminology gaps between the Otsego County System of Care (SOC) service providers and school administration through creating a menu of services that was jargon neutral. The menu will assist administration in selection of services available to their students, families, and staff.

Several System of Care events were organized by MVPHIP including the May 9th Children's Mental Health Day at the Foothills Performing Arts & Civic Center and #Paws for SOC for Back-to-School nights, which promoted the use of therapy dogs in schools.

Obesity

The obesity workgroup selected "Complete Streets" as their primary intervention. According to Smart Growth America, Complete Streets is designed to enable safe access for all modes of transportation including buses, pedestrians, bicyclists, and motorized scooters for individuals of all ages and abilities. When a municipality adopts a Complete Streets policy, it allows municipal planners and engineers to incorporate any number of changes to the community such as: sidewalks, bike lanes (or wide paved shoulders), special bus lanes, comfortable and accessible public transportation stops, frequent and safe crossing opportunities, median islands, accessible pedestrian signals, curb extensions, narrower travel lanes, roundabouts, etc. The MVPHIP continued to provide technical support to municipalities and communities interested in adopting Complete Streets policies.

The workgroup's secondary intervention was food access and the focus of our work in 2019. The MVPHIP proposed developing county-level food system assessments to help guide decision-makers. The MVPHIP convened subcommittees in Schoharie and Montgomery counties to determine their needs related to consumption, production, processing, and distribution of produce and other New York State farm products.

The Schoharie subcommittee decided to increase Farm-to-School initiatives in their county. Farm-to-School includes the promotion and use of New York State foods served in K-12 school cafeterias. MVPHIP invited Sarah Blood, Schoharie Central School District Business Administrator, to share her best practices implementing Farm-to-School in her district with the workgroup. Cornell Cooperative Extension formed a program advisory committee comprised of New York State Agricultural & Markets, SUNY Cobleskill Research Foundation's Creating Healthy Schools and Communities, and MVPHIP in preparation for round five of the Farm-to School funding opportunity.

The Montgomery subcommittee concentrated their efforts on food insecurity. Based on the workgroup discussion, St. Mary's Healthcare formed a community food collaborative. St. Mary's Healthcare, with some assistance from MVPHIP staff, is organizing a Fulton and Montgomery Food Summit to be held in March 2020.



Opioids

The workgroup identified a need for connecting with individuals who have been administered Narcan but refused to be transported to the hospital for further treatment. The workgroup developed a post-Narcan community resource kit that contained local recovery and detox resources, as well as, information on what to expect post-Narcan withdrawal as an outcome of the identified need. MVPHIP staff had the kits reviewed by individuals in recovery and local prevention task forces. After the kits were approved, they were assembled by a local church in Otsego County. The Cooperstown volunteer EMT has agreed to pilot the kits.

The workgroup also reviewed SAMHSA's stigma reducing language titled, "Words Matter: How Language Choice Can Reduce Stigma" to encourage the members of the workgroup and community to use language which promotes help-seeking behaviors. Based on the resource, two factors influence whether stigma will be placed on a disease or disorder: perceived control and fault.

People with substance use disorders that experience stigma may not seek medical treatment or may leave treatment early. The resource recommends replacing the word "addict" with "person with a substance use disorder" and "abuse" with "use."



Self-Management Program Hub

The MVPHIP, New York State Department of Health's Bureau of Chronic Disease, and New York State Office for the Aging co-hosted hub development meetings to continue plans for sustainability of the self-management programs in the region through exploring health plan reimbursements, grant funding, and value based payment options. Workgroup members prioritized their activities through a network survey. Ad Hoc Committees were formed to take action on the selected priorities of sustainability, communication/calendar, and a network charter.

MVPHIP region will be included in New York State Office for the Aging's online Chronic Disease Self-Management Program pilot project Better Choices, Better Health®. The project provides an alternative way for Mohawk Valley individuals with computer and internet access to engage with the chronic disease self-management program. The success of this project may be enticing to payers and help with program reimbursement.



Cultural Competency and Culturally and Linguistically Appropriate Service (CLAS)

The MVPHIP is dedicated to furthering CLAS standards. In 1990, the Office of Minorities was mandated by Congress to address the disparities that language and culture create in health care. In 2000, CLAS standards were developed and then enhanced in 2013. These standards provide a strong framework from which organizations can provide a higher quality of services to minority populations, and policies to assist the provider with implementing strategies to overcome language and cultural barriers.

The MVPHIP staff incorporated CLAS standards into the Otsego and Herkimer counties' System of Care applications. A requirement of the System of Care award was to draft a Health Disparities Impact Statement. MVPHIP staff, with the input from the counties SOC teams, created both Otsego and Herkimer Health Disparities Impact Statements for the SAMHSA System of Care grants. The statements provide the framework for communities to plan and address disparities in their communities.

MVPHIP works closely with our region's Delivery System Reform Inventive Payment program (DSRIP), Leatherstocking Collaborative Health Partners, to address the needs of regionally identified disparate populations. Staff collaborated with LCHP on their Disparities in Care event that featured Health Literacy. Staff were a part of the planning committee and have worked with the keynote, Helen Osborne, to plan the event. Ms. Osborne has several publications and a podcast on Health Literacy. The other speakers included Wilma Alvardo-Little from the NYS Office of Minority Health and Health Disparities Prevention, and Stephan Van den Broucke from Catholic University of Leuven in Belgium who specializes in health literacy. The learning objectives were to be able to identify patient barriers to health literacy such as language, culture, age, emotion, and disability and strategies to overcome them in clinical and community settings.

Data and Visualization

Mohawk Valley Population Health Improvement Program utilizes primary collection and secondary data sources to identify health needs and disparities, to assist with priority selection, and to track changes over time.

Community Health Needs Assessments

The Community Health Needs Assessment provides the hospital, local county health department and stakeholders with data and key informant survey responses so that they may identify, prioritize and address health care challenges facing their communities. Utilizing the New York State's Prevention Agenda 2019 – 2024 action plans, the hospitals, local county health department, and stakeholders can select interventions, which target those identified needs.

MVPHIP collaborated with each local health department and hospital to compile a list of key informants in the service region. Those key informants represent a broad range of sectors, community interests, and included organizations that represent the medically underserved, low-income, and minority populations. In addition to the key informant responses, the assessment includes quantitative data sources from over 300 different health indicators collected and published by New York State, as well as, 175 health indicators included on the MVPHIP website compiled by Healthy Communities Institute. The site includes a comprehensive dashboard of community indicators covering over 20 topics in the areas of health, social determinants of health, and quality of life. The data are primarily derived from state and national public secondary sources.



Primary Data Collection: Youth Risk Behavior Survey

The MVPHIP board and stakeholders reviewed existing data to determine any regional primary data collection needs. County level Youth Risk Behavior Survey (YRBS) data was a recognized need. The CDC collects state level YRBS data allowing for comparisons to the state indicators. The YRBS tracks behaviors that contribute to the leading causes of mortality and morbidity in youth: unintentional injuries and violence, sexual behaviors, alcohol and other drug use, tobacco use, dietary behaviors, physical activity, obesity, and asthma. The MVPHIP has collected data in Otsego, Herkimer, Schoharie, and Fulton counties and the data are posted on our website.

Secondary Data Sources: MVPHIP Website

The MVPHIP.org website provides access to extensive secondary data sources. The indicators are charted and compared to state averages, county values, New York State Prevention Agenda, and Healthy People 2020 goals. It lists prior values and graphs trends. These indicators were essential in compiling many of the region's local hospital and health departments' Community Health Assessments and can be utilized for research projects and grant submissions. Data from the website has proven useful to various stakeholders in their efforts to secure grants and other external funding.

Below is an example of types of data and visulations which is available on the website.

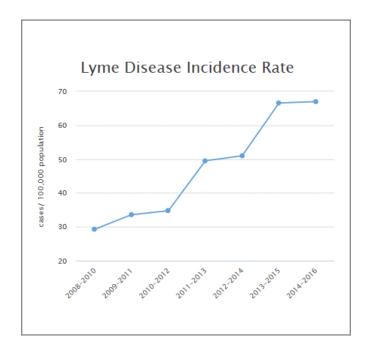
Mohawk Valley Lyme Disease Incidence Rate

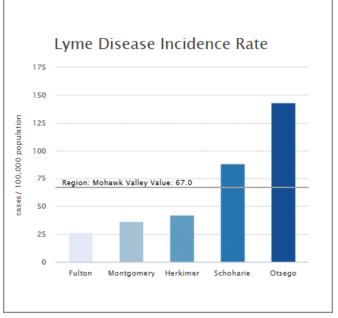
Source: New York State Department of Health's Bureau of Communicable Disease Control

Why is this important? Lyme disease is caused by infection with the bacterium Borrelia burgdorferi. Lyme disease is transmitted by the bite of an infected black-legged tick (Ixodes scapularis). According to the Centers for Disease Control and Prevention (CDC), the tick must be attached to the skin for 36 to 48 hours or more for bacterium transmission to occur. Typical symptoms include fever, headache, fatigue, and a characteristic skin rash called erythema migranes. If left untreated, infection can spread to joints, the heart, and the nervous system. Lyme disease is diagnosed based on symptoms, physical findings (e.g., rash), and the possibility of exposure to infected ticks; laboratory testing is helpful if used correctly and performed with validated methods. Most cases of Lyme disease can be treated successfully with a few weeks of antibiotics. Steps to prevent Lyme disease include using insect repellent, removing ticks promptly, applying pesticides, and reducing tick habitat. The ticks that transmit Lyme disease can occasionally transmit other tickborne diseases as well. Lyme disease is the most commonly reported vectorborne illness in the United States.



Cases per 100,000 population (2014-2016) Lyme Disease Incidence Rate NY Counties NY Value (38.0) NY Value (38.0) Trend





CENTER FOR BIOSTATISTICS



Who We Are

Director: Paul Jenkins, PhD

Junior Research Investigator/Statistician:

Melissa Scribani, MPH

Research Informatics Analyst: Nicole Krupa, BS

The **Bassett Research Institute Center for Biostatistics (CFB)** provides study design assistance and data analysis in support of the overall mission of the Bassett Research Institute. The CFB collaborates with all divisions of the Bassett Research Institute, as well as various other departments of Bassett Healthcare Network.

The center is directed by Paul Jenkins, Ph.D. Dr. Jenkins completed his doctorate in statistics in 1993. The staff of the center consists of a junior research investigator/statistician (Melissa Scribani, MPH) and research informatics analyst (Nicole Krupa, BS).

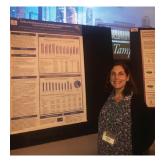
Services provided by the CFB include writing methods and analysis sections of grant proposals, comprehensive data management, statistical analysis, interpretation of study results, database building, assistance with developing experimental designs, manuscript writing and review, drafting tables and graphic materials for poster and podium presentations, as well as mentorship of students ranging from the bachelors through doctoral levels.

The center maintains more than 35 large databases (as of 2019) relating primarily to research in obesity, diabetes, heart disease, health behaviors, and orthopedics. Center staff also conduct analyses on large national databases including the CDC's National Health Examination Survey (NHANES), the Behavioral Risk Factor Surveillance System (BRFSS), the Statewide Planning and Research Cooperative System data (SPARCS), the NYS Office of Alcoholism and Substance Abuse Services (OASAS), among others. Ms. Krupa serves as the Bassett Research Institute's expert in data requests involving the Bassett Healthcare Network electronic medical record system (EPIC).

During 2019, center staff co-authored more than twenty peer-reviewed manuscripts, published in journals of occupational health, global health, implementation science, pediatric, primary care, orthopedic, LGBT health, and clinical medicine. All members of the Center for Biostatistics are proficient in Statistical Analysis Software (SAS), as well as a variety of survey/data collection platforms and database programs, including REDCap.

The CFB staff also contributed to more than a dozen abstracts that were presented at national and international meetings, including the American Association for the Study of Liver Diseases Annual Meeting in Boston, MA, the American Heart Association meeting in Washington, D.C., the American College of Cardiology conference in New Orleans, LA, the World Professional Association for Transgender Health (WPATH) in Buenos Aires, Argentina, the Pediatric Societies meeting in Baltimore, MD, and the Child, Adolescent and Young Adult Behavioral Health Conference in Tampa, FL.





Ms. Scribani presenting her poster "Mental Health Quality of Life Measures Among Rural Transgender and Gender Expansive Youth" at the Child, Adolescent and Young Adult Behavioral Health Conference, Tampa, FL, March 5, 2019.



LEAD: Anne Gadomski, MD, MPH Melissa Scribani, MPH, Nancy Tallman, Melinda Robinson

The Center for Evaluating Rural Interventions (CERI) conducts internal evaluations as well as external evaluations commissioned under contract varying in scope from small BRI-specific projects, to multi-county New York State-funded projects, to federally-funded multi-institutional grants (NEC/NYCAMH, Otsego County System of Care). CERI provides services including refining evaluation question(s), partnering in program planning, creating systems that incorporate measurement and real-time reporting, assisting stakeholders in understanding data and writing evaluation sections for grants. CERI uses a variety of evaluation techniques including logic models, timelines, focus groups, social network analysis, cost analysis, surveys and data visualization to conduct our evaluations and present findings to stakeholders.

That is all well and good, but **what** is evaluation? Michael Scriven, an evaluation expert, defines evaluation as a systematic process to determine merit or value, i.e. assessing the success of a project or program in meeting its objectives. Evaluations can be about developing an intervention, assessing its implementation, measuring the impact or outcome(s) of a policy or program, or providing accountability/oversight. When you want to know if a program, intervention or special project works in real world settings, call an evaluator. Stakeholders use evaluation findings to inform decisions about whether to continue, expand, or end a program. Funders use evaluation results to decide whether to continue funding future programs.

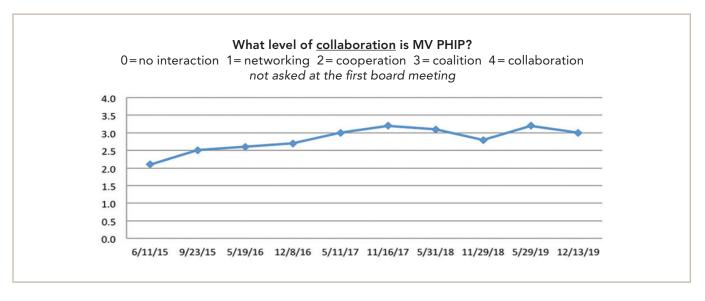
CERI takes a developmental, or formative, approach to program evaluation. CERI uses brief feedback reports to allow multiple stakeholders to track progress and make adjustments as implementation proceeds. That approach equates to maintaining an active role in program development and implementation by working closely with program directors and staff to understand what the objectives of the program are, how the program is being implemented, whether the program is doing what it is supposed to be doing, and what results are being generated by the program. Perhaps most importantly, evaluation seeks to know: can the results be attributed to the program? CERI is exploring how contribution analysis or implementation science may be useful in answering that question.

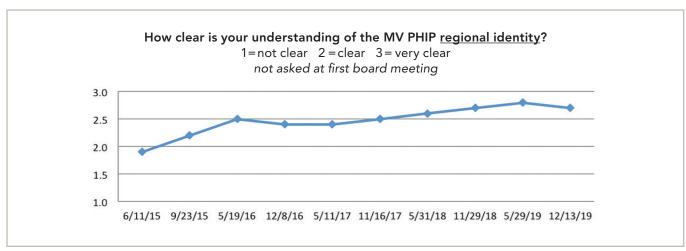
THE CENTER FOR EVALUATING RURAL INTERVENTIONS PROGRAMS:

- I. MVPHIP
- II. Gender Wellness Center
- III. Otsego County Systems of Care
- IV. NEC
- V. Workforce Resilience

I. MVPHIP Evaluation

Mohawk Valley PHIP evaluation CERI has been evaluating the Mohawk Valley PHIP since its inception in 2015. MVPHIP is a data-driven effort to mobilize a variety of stakeholders to improve regional population health in seven counties. CERI conducts surveys of stakeholder engagement and collaboration at stakeholder meetings and workgroups, tracks board participation and performs annual social network analysis to assess changes in the level of stakeholder engagement and community collaboration. These data are presented to board members to help them visualize and foster stakeholder engagement. The graphics below show that MVPHIP board members had a clear understanding of the MVPHIP regional identity. The level of collaboration graphic shows that MVPHIP board members felt they reached the coalition level collaboration over time. This grant ends March 31, 2020.





II. Gender Wellness Center

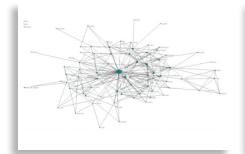




The **Gender Wellness Center (GWC)**, led by Dr. Carolyn Wolf-Gould, is a gender-affirming service embedded within the Susquehanna Family Practice at Fox Care. As such it is a unique model for delivering transgender health care. From 9/1/16 – 10/31/19, GWC was funded by the Robert Woods Johnson Foundation (RWJF) Clinical Scholars Program to establish a Center of Excellence (COE) for Transgender Health. CERI worked closely with the GWC to build a pediatric registry in order to answer several research questions generated by GWC clinicians. At the time registry enrollment ended 10/25/19, 186 youth ages 8 to 21 years were enrolled in the registry that will be updated regularly and maintained by CERI. Registry analysis has led to several abstract presentations at national and international conferences. To date, one paper has been published that describes how the registry was designed. Other findings include a high prevalence of non-suicidal self-injury among transgender youth (paper submitted). In 2020, CERI will continue to analyze the pediatric patient registry and present its findings.

Using an implementation science framework called the Consolidated Framework for Implementation Research (CFIR), our team evaluated the implementation process for the creation of the GWC as a rural-based COE in Transgender Health. Dr. Pamela Tinc used implementation science to systemically review the barriers and facilitators the GWC experienced in its transition towards a COE. This involved analysis of CFIR constructs obtained by staff survey midway and at the end of the RWJF grant. Results showed that much of the implementation process revolved around developing infrastructure, increasing organizational capacity and resolving conflicts between the inner and outer settings of the GWC. As a result, GWC was better integrated into the overall rural health network. Dr. Tinc gave an oral presentation titled "Applying the CFIR to the Implementation of a Center of Excellence in Transgender Health" at the annual Academy Health Implementation and Dissemination meeting in Arlington, VA on 12/5/19.

CERI also conducted social network analysis to document the growth in the GWC COE as shown in the yearly sociograms depicted below. This analysis documents an increased number of connections among individuals, more communication between GWC staff both internally and externally, and more communication about the GWC within the Bassett Health Network. While general communication had increased during this time period, the proportion of contacts for patient consult/referral decreased. This finding suggests that capacity within the network increased and/or that patients were being referred or were self-referred to the GWC, given the fact that number of patients seen at the GWC increased significantly during this time period.







Substance Abuse and Mental Health Services Administration **SAMHSA WOW. Married and a

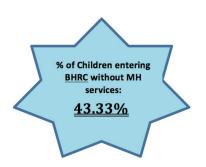


III. Otsego County Systems of Care (SOC)

CERI has been evaluating the **Otsego County Systems of Care (SOC)** grant funded In September 2018 by the Substance Abuse and Mental Health Services Administration (SAMHSA). The goal of this five year federal grant, led by Susan Matt and Marion Mossman of the Otsego County Mental Health Department, is to develop a system of care for preventing and treating youth mental health problems and supporting their families. The goals of the SOC include creating clinical linkage through increasing early identification of youth at risk of developing and/or experiencing serious emotional or mental problems or substance abuse, facilitating linkage to services for families, and implementing Evidence-Based Practices. CERI conducts data collection, entry, and analysis to monitor outcomes of children served by the SOC as well as to evaluate the SOC social network.

The SOC serves children from birth to age 5 years through the newly formed collaborative hub of integrated community empowerment services (CHOICES) program. In collaboration with the Early Intervention Program, the Family Resource Network, Inc. (FRN), a member of Families Together New York, leads the Otsego County's SOC expansion and enhancements for birth – age 5 children and families with a special need. In the first year of the grant, 23 children were identified by CHOICES and none of these children had received mental health services before.





Youth ages 5 to 21 years are served through the Behavioral Health Resource Center (BHRC) located at the Otsego Northern Catskill Board of Cooperative Educational Services (ONC BOCES) in Milford. The BHRC is evolving into a hub for educators, health and service providers, families and students to access an array of resources that will include assessment, treatment, family support, peer services, prevention, early intervention, training, education, juvenile justice support, social services, and crisis services. In the first year of the grant, 165 youth ages 6 through 18 were identified by BHRC and

43% of these youth had not received mental health services before. Of these, 81 were officially enrolled in the SOC, meaning that CERI entered their data into SAMHSA's National Outcome Measures (NOMs) System that SAMHSA uses to compare SOC's across the nation.

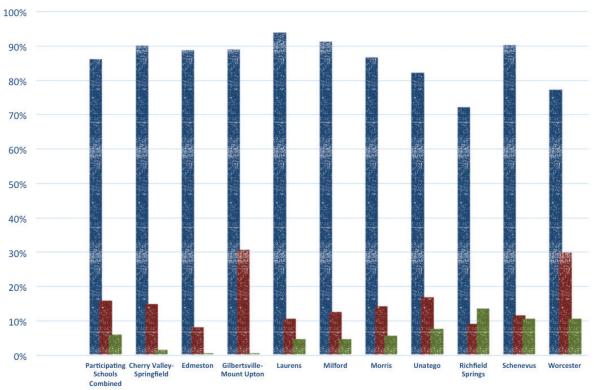
It will be CERI's job to measure whether this enhanced system works. CERI is creating a dashboard in order to monitor indicators that might capture the effects of the multilevel interventions that the SOC is trying to implement. An expected challenge in using existing data is that it is difficult to obtain real time or current data. For example, while the SOC hopes to positively impact the following indicators, the data lag for these indicators is 2 to 3 years (see graph below).

III. Otsego County Systems of Care (SOC)

(NOMs) System that SAMHSA uses to compare SOC's across the nation.

It will be CERI's job to measure whether this enhanced system works. CERI is creating a dashboard in order to monitor indicators that might capture the effects of the multilevel interventions that the SOC is trying to implement. An expected challenge in using existing data is that it is difficult to obtain real time or current data. For example, while the SOC hopes to positively impact the following indicators, the data lag for these indicators is 2 to 3 years (see graph below).

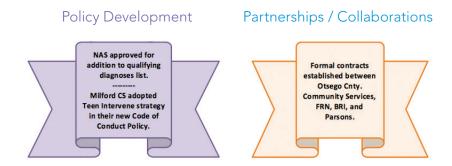




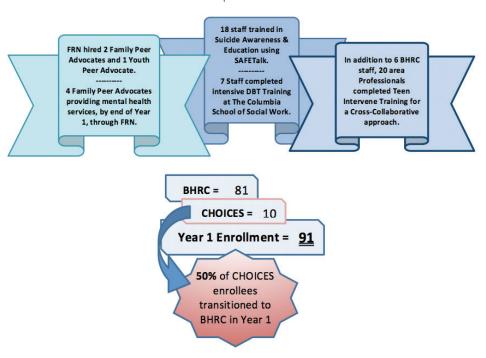
■ Graduation Rate 2017-18 Absenteeism Rate 2017-18 Suspension Rate 2015-16

III. Otsego County Systems of Care (SOC)

Year 1 accomplishments include the following:



Partnerships / Collaborations



III. Otsego County Systems of Care (SOC)

In order to build the capacity to provide mental health services in Otsego County, the SOC provides training in evidence based practices such as dialectical behavioral therapy (DBT) for counselors, nurses, clinicians and social workers. FRN provides a parenting program called Nurturing Parenting that has been well attended. In 2020, the SOC is also seeking ways to implement trauma informed principles throughout the SOC including schools, law enforcement and health care.

CERI is monitoring the implementation of the SOC as it relates to its logic model below.

Context Goals Strategies Outputs Outcomes

Population Focus

Birth-21 years old with a MH dx and their families residing in Otsego County, and any youth with MH dx enrolled in ONC BOCES.

Community Need

Otsego county is above the average in NYS for children diagnosed (dx) with a mental health (MH) disorder with about 17% of school aged children in NYS havinge received mental health treatment in Otsego County. Families often do not know what resources are available.

Proposal

The expansion of the Systems of Care (SOC) will unite the existing healthcare system, government agencies, community organizations, and schools to improve mental health care for children/youth with MH dx or at risk of developing SED/SMI/SUD.

- Organize Behavioral Health Resource Center (BHRC)
- Organize the Collaborative Hub of Integrated Community Empowerment Services (CHOICES)
- Prevent substance abuse and reduce complications of mental illness
- Expand and integrate healthcare systems
- Integrate trauma informed care into the Otsego County SOC
- Engage youth and peers in recovery support
- Enhance and expand workforce capacity
- Increase cultural and linguistic competence
- Measure SOC social network and reach of implementation
- Identify children with MH dx or at risk of SED/SMI/SUD
- Measure outcomes of SOC interventions

SOC Logic Model Otsego County 12/23/2019

Partnership Change

• Develop CHOICES & BHRC

"hubs" that have weekly team
meetings. Partner with GBHC to
replicate OnTrack NY. SPOA
moves to BOCES. CHOICES
will have single point of access
for early intervention (SPOAEI).

• Engage all school districts

Training & Technical Assistance Provide training in evidence based practices: dialectical behavioral

therapy, Nurturing parenting, use CANS and FANS, implement trauma informed principles • Provide cultural competency

 Develop youth advisory board to train youth leaders
 Develop training program for masters level social workers
 Provide paid internships for social

 Provide paid internships for social work and MH counseling students
 Expand employment under NHS Corps Loan Repayment Program
 Create opportunities for certification and employment of the peer

workforce

*Provide education on 211

*Technical assistance for data collection, entry and analysis
Support Strategic Communic

Support Strategic Communication

Create easily accessible forum using a networking approach through CHOICES & BHRC

Connect the activities of services

 Connect the activities of services through the CHOICES and BHRC
 Promote use of HIT, webinars, etc.
 Build relationships with universities to recruit graduates

 Create dashboards to monitor utilization and provide feedback
 Implement social marketing and a webpage

Better understanding

- of partners' roles
 Increased access to,
 utilization and
 coordination of SOC
 services amongst
 partners
- School districts are engaged
- Law enforcement and first responders are prepared to address individuals with behavioral health issues
- Services addressing behavioral issues are delivered earlier
- Improved quality of SED/SMI/SUD care
- Increased cultural competence for service providers
- Increased self efficacy for people in recovery
- Increased peer engagement
- Increased family knowledge of and engagement in services
- Increased networking and communication within the SOC
- Data informed behavioral health services and SOC

Functional Outcomes

- Fewer children with SED/SMI/SUD
- Less out of home placement
- Stronger and more resilient family systems
- Improved wellness for individuals and families through social connections and peer support
- Improved success in school and employment
- Decreased substance use and other risk behaviors

Process Outcomes

- Increased communication among SOC members
- Greater engagement of community youth
- Improved workforce capacity and access
- Increased cultural competence
- Increased use of EBPs
 Improved services
 based on evaluation
- feedback
 Improved staff
 satisfaction
- Improved help seeking experience for youth and families.

IV. The Northeast Center For Occupational Health and Safety: Agriculture, Forestry And Fishing



The Northeast Center for Occupational Health and Safety (NEC), is an agricultural education, research, and prevention center funded by the National Institute for Occupational Safety and Health (NIOSH). NEC aims to reduce occupational injuries in agriculture, forestry, and commercial fishing (AFF) sectors in the Northeastern US, from Maine through West Virginia. NEC has been awarded funding in five-year cycles, with the most recent cycle starting in September 2016. (See NYCAMH/NEC website or their Year in Review for full report).

In 2019, CERI conducted quarterly data collection with NEC researchers to track project progress and documented intermediate outcomes as well as success stories.

A notable program completed in 2019 was a research project led by Julie Sorenson PhD that aimed to prevent drowning among fishermen. Rebecca Weil and Jessica Echard coordinated this complicated implementation of distributing and marketing personal floatation devices to the Maine and Massachusetts commercial fishing ports.



Lifejackets for Lobstermen set up to sell personal floatation devices at the dock at Cape Porpoise, Maine, August 2019.



NEC completed their Lifejackets for Lobstermen Project in November 2019. In an eight month period, their vans distributed 1076 lifejackets to commercial fishermen in Maine and Massachusetts.



Amanda Roome and Erin Lally attending the sale table at a dock in Maine. Amanda Roome (left) joined the BRI as a Research Scientist in December 2019. From her work with fisherman, she learned that many of them had had Lyme disease. An intriguing finding that she will continue to investigate as she sets up our tickborne disease research focus at the BRI.

V. Workforce Resilience

During the implementation of the Patient Protection and Affordable Care Act of 2010, the IHI's Triple Aim became part of the nation's strategy for US healthcare: To improve the patient's experience of care, improve health populations and reduce the per capita cost of healthcare. With growing demands, burdensome tasks and other increased stressors in healthcare, the healthcare workforce suffers from alarmingly high rates of burnout, including more than 50% of US physicians who report significant symptoms of burnout. Burnout is associated with lower patient satisfaction, poorer healthcare outcomes and increased healthcare. Burnout also exacts a significant personal toll on organizations' human resources (including high rates of depression and suicide).

Caring for and serving rural populations with high healthcare disparities presents additional unique challenges including large geographic areas, poor availability of qualified personnel and the geographic, social / collegial and educational isolation of professional staff. These challenges compound other social determinants of health typical of more urban high healthcare disparity areas. Given the population's need for care, preventing burnout and retaining a healthy healthcare workforce is of paramount importance.

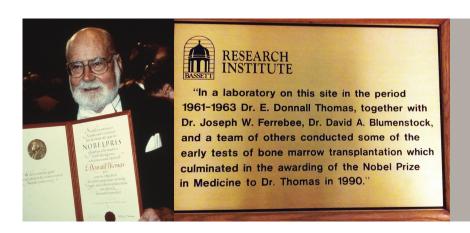
CERI, in collaboration with the Center for Biostatistics, the Bassett Healthcare administration and the Department of Medical Education, has been instrumental in assessing the problem of burnout within Bassett Healthcare and in the development of interventions to improve workforce health, resiliency and engagement. Engaging a healthier and more resilient workforce is part of the larger strategies to improve patient care and population health in our region. Led by Dr. Caroline Gomez Di Cesare, the team is using validated internal and external tools to identify priority focus areas. By using the literature to identify evidenced-based high value interventions, collaborating with other institutions, and soliciting feedback from employees, we are designing and implementing multiple organizational approaches to educate the workforce and to improve health, resiliency and engagement.

Accomplishments in 2018 included work to increase education of the workforce through a variety of venues such as CME conferences, the restructure and redesign the Employee Heath Committee with an increased focus on employee wellbeing, and providing new opportunities for collegial celebrations and networking. In 2018, we continued to work closely with residents to design and implement a trainee-driven wellness plan (ResWell). We presented a poster outlining the ResWell program at the Association of Independent Academic Medical Centers Annual Meeting in April 2018. As a recipient of the William F. Streck, MD, Fellowship in Health Policy and Management, Dr. Gomez-Di Cesare attended and presented our work at the 2018 International Conference on Physician Health in Toronto, Canada. Dr. Gomez-Di Cesare also collaborated with the Medical Society of the State of New York Committee on Physician Wellness and Resiliency to publish an article in the *Journal of Hospital Administration* 7:52-59, 2018, "Physicians' electronic health records use at home, job satisfaction, job stress and burnout."

In 2019, Dr. Gomez-Di Cesare will continue collaboratively to educate, advocate for changes at an organizational level, implement strategies and assess impacts on workforce wellbeing and satisfaction, using the data for further strategy iterations.

E. DONNALL THOMAS RESIDENT RESEARCH PROGRAM

Chair: Anne Gadomski, MD, MPH



In recognition of Dr. Thomas' remarkable achievements while at Bassett, a program designed to stimulate research interest among our residents has been named in his honor.

PAST PRESENTATION LOCATIONS Vancouver, BC, Canada Toronto, Canada Rochester, NY Amsterdam, Netherlands San Francisco, CA Long Beach, CA Los Angeles, CA Cooperstown, NY Quebec City, Quebec, Canada Boston, MA 2019 London, England aris, France Vienna, Austria Ft. Lauderdale, FL ndo, FL Atlanta, GA Washington, DC Las Vegas, NV Orlando, FL Sydney, Australia San Antonio, TX Philadelphia, PA New Orleans, LA Naples, Italy

F. DONNALL THOMAS AWARD

Fred Appelbaum Visit in July 2019



E. Donnall Thomas (EDT) Resident Research Program **Frederick Appelbaum, M.D.**

Executive Vice President and Deputy Director, External Affairs, Fred Hutchinson Cancer Research Center Member, Clinical Research Division Professor, Division of Medical Oncology, University of Washington Presented IDGR 7/17/19 on the history of bone marrow transplantation starting at the BRI

Don and Fred

- The E. Donnall Thomas Award is given annually to a Bassett trainee who has conducted exceptional research while at Bassett Medical Center during residency. The award is named in honor of E. Donnall Thomas, who served as Bassett's physician-in-chief from 1955 to 1963. He was awarded the 1990 Nobel Prize in Medicine for his pioneering work in bone marrow transplantation, which we began at Bassett. Dr. Thomas performed the world's first human bone marrow transplant at Bassett in 1956.
- Fred Appelbaum worked closely with Dr. Thomas for several decades he recruited Fred to Seattle.
 When he stepped down from leading our transplant program and adult leukemia center, Fred inherited
 the opportunity. Fred has been in Seattle for 40 years, and is writing a book describing Don and the story
 of bone marrow transplantation. Bassett plays a key role and that is why Fred visited July 16, 2019 to learn
 more about EDT, what he did here and interview Dr. Ted Peters. Fred also presented IDGR on July 17, 2019.





2019: 1 New Project for 2019 - 12 Active Projects

Haisam Abid, MD, and Anukrati Shukla, MD Principal Investigator: Anush Patel, MD, FACP

Approved 2019

Dr. Abid's proposal entitled, "Impact of patient weight on anti-factor Xa levels in non-surgical inpatients using standard enoxaparin dosing for thromboprophylaxis" was approved by the EDT Committee in June 2019. The project is designed as a prospective cohort study, enrolling up to 100 patients who are admitted to inpatient general medicine service and receive the standard dosing of enoxaparin.

Ethan Talbot, MD

Principal Investigator: Erik Riesenfeld, MD

Approved 2017

Dr. Talbot's project, "ICU Liberation: Does Enhanced Patient Mobilization Improve Outcomes?' was approved for funding October 5, 2017. After IRB approval ten accelerometers were purchased to measure change in mobilization of ICU patients. Barbara Petersen and Craig Gecewicz, the clinical nurse champions, attended the early mobilization course at Johns Hopkins University in order to plan the implementation of the intervention in the Bassett ICU. The team began using the devices November 30, 2017 to measure baseline mobilization. Data was collected from this baseline group for approximately five months. At the E. Donnall Thomas Resident Research Poster Session on April 29, 2019 Dr. Talbot presented his preliminary data with his poster entitled, "ICU Liberation: Planning, Hurdles, and Implementation." His poster received 2nd place in the judging.

Konika Sharma, MBBS Principal Investigator: James Dalton, MD Approved 2017



This study was approved June 29, 2017. The Retina Vue device purchased for this study arrived in November 2017 and data collection began in 2018. The enrollment goal of 50 patients was met by July 2018. Dr. Sharma was the winner of the Outstanding Resident Research Award for 2019 for her poster entitled, "Is a Hand-Held Non-Mydriatic Fundus Camera Superior to Referred Dialated Eye Exams for the Screening and Detection of Diabetic Retinopathy in a Primary Care Setting?" at the E. Donnall Thomas Poster Session held at Bassett Medical Center in Cooperstown, NY, April 29, 2019.

Andrew Powers, MD

Principal Investigator: Eric Mooney, MD

Approved 2017

Dr. Power's project entitled "Injury Etiology, Prevalence and Sequelae Among Elite Youth Baseball Players," was approved May 25, 2017. Molly Mooney, a summer student research assistant, along with the nurses from the BRI's Center for Clinical Research enrolled subjects during the summer of 2017. Over 50 participants were enrolled at the conclusion of the baseball season in Cooperstown. Follow-up calls to the players were completed and the data has been analyzed. Dr. Powers presented his poster with the same title as his project at the E. Donnall Thomas Poster Session held at Bassett Medical Center in Cooperstown, NY, April 29, 2019. Dr. Powers has written and submitted two abstracts and acceptance is pending on both.

Kara Watthanasuntorn, MBBS, Bishesh Shrestha, MBBS Principal Investigator: Randolph Hutter, MD Approved 2016





Note: Dr. Watthanasuntorn assumed the Resident Researcher status on this project June 2018 from Dr. ElBebawy. As with the other three podocan studies, sample analysis was returned from Baylor in June 2018. On March 17, 2019 Dr. Watthanasuntorn presented her poster entitled, "Comparing Cardiovascular (CV) Outcomes in Cancer Survivors With Coronary Artery Disease (CAD) Versus CAD Patients Without Cancer History: Role of Wnt Pathway and Inflammation" at the American College of Cardiology Annual Meeting in New Orleans, LA.

Dr. Watthanasuntorn also presented her abstract entitled, "The novel small leucin-rich repeat protein podocan is an independent predictor of major adverse cardiac eventsin patients with angiographically-defined coronary artery disease" in Paris, France on September 2, 2019 at the European Society of Cardiology (ESC) Congress.

Benjamin Dao, MD, Nancy Bethuel, MD, Principal Investigator: Randolph Hutter, MD Approved 2016



Note: Dr. Bethuel assumed the Resident Researcher status on this project June 2019, on the study entitled, "Podocan/Wnt pathway in coronary artery disease." The project was originally approved May 6, 2016 with Ibrahim Sayyid, MBBS as Resident Researcher. The proposal is entitled, "Role of Podocan and Wnt Pathway in Accelerated Coronary Artery Disease." A total of 549 patients of the target 900 have been enrolled. On March 16, 2019, Dr. Dao presented his abstract entitled, "DKK1 predicts vascular calcification and clinical outcomes after percutaneous, at the American College of Cardiology meeting held in New Orleans, LA.

Saeeda Fatima, MBBS/ Kanjit Leungsuwan, MD Principal Investigator: Daniel Katz, MD Approved 2016



Dr. Fatima's proposal entitled, "Podocan and Wnt Pathway in the Development of Aortipathy in Bicuspid Valve Disease" was approved May 23, 2016. Dr. Kanjit Leungsuwan assumed Resident Researcher status on this study in June 2018. On March 16, 2019 Dr. Leungsuwan, presented his poster entitled, Podocan Is Inversely Related to Wingless Signaling Pathway Molecules Dickkopf-Related Protein 1 in Relation to Aortic Diameters in Patients With Bicuspid Aortic Valve," at the American College of Cardiology meeting held in New Orleans, LA.

Kanjit Leungsuwan, MD Daniel Katz, MD Approved 2015



Namadha Panneerselvam, MBBS was the Resident Researcher on this project until June 2017. At that time Dr. Leungsuwan assumed the Resident Researcher position for this study. The proposal entitled, "Clinical Protective Value of Podocan and WNT Pathway Regulatory Molecules on Maladaptive Left Ventricular Response in Aortic Stenosis, was originally approved October 9, 2015. The study progress had been slow due to inadequate referrals for CMR, however adequate data was acquired and as a result Dr Leungsuwan's poster entitled, "DKK-1, A Wingless (wnt)-Regulatory Molecule, Identifies Maladaptive Left Ventricular (LV) Remodeling in Aortic Stenosis (AS)" was accepted and presented at the 2018 AHA meeting held November 10-12, 2018 at McCormick Place, Chicago, IL. On March 17, 2019 Dr. Leungsuwan presented his poster entitled, "Role of Wingless-Regulatory Molecules Dickkopf-Related Protein 1 and Podocan on Left Ventricular Remodeling in Patients With Aortic Stenosis" at the American College of Cardiology meeting held in New Orleans, LA.

Nataliya Yuklyaeva, MD

Principal Investigator: Donald Raddatz, MD

Approved 2014



Dr. Yuklyaeva's proposal, "Immune Response to Influenza Vaccination in Patients with Rheumatoid Arthritis Receiving Treatment with Biologic Agents" was approved June 18, 2014. At the January 8, 2015 Committee meeting Dr. Yuklyaeva gave an update on her project reporting good recruitment numbers with no complications. She has begun writing her findings to submit for publication. Dr. Yuklyaeva presented her results at the E. Donnall Thomas Resident Research Poster Day on May 15, 2015. On May 16, 2016 Dr. Yuklyaeva presented her poster (same title) at E. Donnall Thomas Resident Research Poster Day that included her current data. Dr. Yuklyaeva's abstract (same title) was accepted for poster presentation at the Annual European Congress of Rheumatology held in London, England in June 2016 sessions.

Update 2019: Dr. Yuklyaeva's paper was published as a result of her EDT research project.

Kaston-Jolly J, Yuklyaeva N, Victory J, Scribani M, Lasek-Nesselquist E, Shahnawaz A, Raddatz D, Lawrence DA. Blockage of Tumor Necrosis Factor α Versus CD80/86 Signaling on the Response to Influenza Vaccination of Rheumatoid Arthritis Patients. Journal of Immunology Forecast. April 12, 2019 Vol 2, edition 1, article 1006, pp1-8. Htpps://scienceforecastoa.com.

Karn Wijarnpreecha, MBBS

Principal Investigator: Pascale Raymond, MD

Approved 2016



Dr. Wijarnpreecha's project entitled, "Predictors of Mortality in Chronic Liver Disease" was approved November 10, 2016. The data produced from this project has given Dr. Wijarnpreecha the opportunity to develop several abstracts and poster presentations, as well as a journal article, and has received International attention. As a result of this

research project, Dr. Wijarnpreecha received a full International Liver Congress (ILC) travel award as a Young Investigator to give an oral presentation of his abstract at the largest hepatic conference in Europe. Dr. Wijarnpreecha's abstract: Wijarnpreecha K, Raymond P, Scribani M. Smoking and metabolic syndrome components are independent predictors of mortality in patients with chronic liver disease in the United States, was presented at the International Liver Congress in the Netherlands April 19-23, 2017. In addition, his paper entitled, Noninvasive fibrosis markers and chronic kidney disease among adults with nonalcoholic fatty liver in USA was published in the European Journal of Gastroenterology and Hepatology using data from this research.

In 2018 Dr. Wijarnpreecha was awarded Young Investigator bursary, granted by the EASL Organizing Committee as the presenter of the abstract "Associations between Sarcopenia and Nonalcoholic Fatty Liver Disease and Advanced Fibrosis in the United States." The International Liver Congresstm was held in Paris, France, April 11-15, 2018.

This same poster won the E. Donnall Thomas Resident Research Award for Outstanding Research for 2018 held at the poster session on May 1, 2018 at the Bassett Medical Center, Cooperstown, NY and was accepted for presentation at Digestive Diseases Week (DDW) held at the Walter E. Washington Convention Center, Washington DC, June 2-5, 2018.

In addition, Dr. Wijarnpreecha was awarded a travel fund from the United European Gastroenterology (UEG) group to give an oral presentation entitled, "Sarcopenia and NAFLD." UEG Week was held in Vienna, Austria, October 20-23, 2018. Dr. Wijarnpreecha was unable to attend, however Pascale Raymond, MD, Attending Gastroenterologist at Bassett Medical Center and Principal Investigator on this study, was able to present in Dr. Wijarnpreecha's place. It should be noted that Dr. Raymond received the award for "Best Abstract Oral Presentation" at the Vienna Meeting.

Update for 2019: Dr. Wijarnprecha had two papers published this year as a result of this study:

Wijarnpreecha K, Kim D, Raymond P, Scribani M, Ahmed A. Associations between sarcopenia and nonalcoholic fatty liver disease and advanced fibrosis in the USA. 2019, European Journal of Gastroenterology & Hepatology. Wolters Kluwer Health, Inc DOI:101097/MEG.0000000000001397.

Wijarnpreecha K, Scribani M, Kim D, Kim WR. The interaction of nonalcoholic fatty liver disease and smoking on mortality among adults in the United States. Liver Int 2019, Vol 39 issue 7 pp 1202-1206. doi: 10.1111/liv.14058.

Kulothungan Gunasekaran, MBBS Principal Investigator: Lee Edmonds, MD Approved 2015

Dr. Gunasekaran's proposal entitled, "ESAP study (simple neck grasp) as a predictor of OSA in patients with type 2 diabetes," was approved April 21, 2015. In his 6-month update presented to the EDT Committee, Dr. Gunasekaran reported on the number of patients recruited, and number completing all tests. Patients already diagnosed with OSA have been excluded as per the protocol criteria. In February 2016 an interim analysis was conducted from the completed test results of 30 patients. Dr. Gunasekaram presented his poster at the E. Donnall Thomas Resident Research Poster Day on May 16, 2016. Dr. Gunasekaran and Dr. Edmonds have written a paper and will be submitting it for publication. Dr. Gunasekaran graduated in June 2016.

Update for 2019: Dr. Gunasekaran had a paper published this year as a result of his study:

Edmonds PJ, Gunasekaran K, Edmonds LC. Neck Grasp Predicts Obstructive Sleep Apnea in Type 2 Diabetes Mellitus. Sleep Disorders, Volume 2019, Article ID 3184382, 6 pages. https://doi.org/10.1155/2019/3184382.

Shashank Kotakonda, MBBS

Principal Investigator: David Ullman, MD

Approved 2015

Note: Patricia Escaler, MD assumed Resident Researcher status on this project in June 2016 from the original Resident Researcher, Shashank Kotakonda, MBBS

Dr. Kotakonda's proposal entitled, "Impact of topical pharyngeal anesthetics on discharge of patients when used in conjunction with Propofol sedation in routine EGD's," was approved May 26, 2015. Dr. Kotakonda's poster entitled, "Topical Pharyngeal Anesthesia during Sedation for EGD" won the award for Outstanding Research Poster Presentation for 2016 at the E. Donnall Thomas Resident Research Poster Day on May 16, 2016. Dr. Kotakonda presented his findings at Interdepartmental Grand Rounds in May 2016 at the Bassett Medical Center. He graduated in June 2016 at which time Dr. Escaler assumed Resident Researcher duties for this project. Dr. Escaler will be compiling/finalizing the data on this study. A paper is being written and will be completed for submission after the final data is available.

Update for 2019: Dr. Kotakonda: had a paper published this year as a result of his study:

Ullman D, **Kotakonda S**, Victory J, Scribani M. Relation of viscous lidocaine combined with propofol deep sedation during elective upper gastrointestinal endoscopy to discharge. Baylor University Medical Center Proceedings, July 1, 2019, https://doi.org/10/1080/08998280.2019.1641058.

RESEARCH CELEBRATION WEEK AT BASSETT APRIL 29 – MAY 2, 2019





In 2015, the BRI expanded the poster displays to highlight other areas of research conducted throughout the Bassett Healthcare Network, in addition to the E. Donnall Thomas (EDT) Resident Research program. The first year was deemed a complete success and "Celebrating Research at Bassett" has evolved into a yearly function. Posters are displayed in the clinic lobby, with each day of the week representing a different group. The week-long display offers an opportunity to inform and update staff, patients and the public of the varied projects, ongoing studies and research accomplishments at Bassett.

Monday, April 29: NEC/NYCAMH 10 Posters displayed covering farm, fishing and logging safety studies. Poster authors were on-hand during lunchtime to answer questions and discuss their research.

Tuesday, April 30: 9 Resident Scholarly and Case Studies were displayed. This was the second year this group presented posters. They are planning to continue their participation in 2020.

Wednesday, May 1: E. Donnall Thomas Resident Research, 9 Posters for presentation/reception and judging. All residents are required to be at their posters (4-6pm) prepared to discuss their research and answer any questions. The winner for Outstanding Resident Research Award for 2019 was Konika Sharma, MD for her study/poster entitled, "Is a Hand-Held Non-Mydriatic Fundus Camera Superior to Referred Dialated Eye Exams for the Screening and Detection of Diabetic Retinopathy in a Primary Care Setting?"

Thursday, May 2: Nursing Research Evening – Nursing Research Poster winners for 2019:

Professional/Non-Student

Megan Greenman, DNP, RN, CCNS, CWCN and Sarah Luckette, BSN, RN, C-EFM, "Effect of Training on Critical Care Nurse Resilience"

Graduate Student

Jennifer N. Ross, BSN, RN, SUNY Delhi, "The Experience of Opioid Addiction and Abuse on the Family Unit"

Undergraduate Student

Andrea Debboli, Rachel Kowalczyk, Rachel Pine, Ashley Smatko, Hartwick College, "Support for Spouses Caring for Patients with Alzheimer's Disease"

Friday, May 3: Bassett Research Institute – 12 posters displayed. A wide range of research topics were displayed and included research on older drivers, diabetes self-management, transgender youth, the fruit and vegetable prescription program and other posters reviewing the BRI's current research. Authors were on-hand during lunchtime to answer questions and discuss their research.

BRI MEDICAL RESIDENT RESEARCH INTRODUCTION 2019 Wednesday Afternoon(s) 10 Weeks for (ACGME)



Since 2017, the BRI has conducted an orientation program offered to the PGY1 medical residents to orient them to research opportunities at the BRI. The Residents who participated in the program offered enthusiastic comments. Each Wednesday afternoon beginning July 24, 2019 and continuing through April 2020, a resident met with BRI staff for five, half-hour increments. The schedule and information covered was as follows:

Beth Worden

Beth Worden, Executive Assistant – E. Donnall Thomas Resident Research Program

- Research is not QI
- How to submit an EDT application for resident research
- Publication guidelines and acknowledging EDT funding

Jennifer Victory, RN – Nurse Supervisor Center for Clinical Research (CCR)

- CCR function and facilities
- Resident's role in research
- CCR nurse role in research
- Patient recruitment guidelines

Heidi Johnson, CIP – Program Manager, IRB

- IRB certification process for investigators
- IRB approval process for proposals
- When IRB oversight is needed (i.e. research vs. QI project vs. exemptions)

David Strogatz, PhD – Research Scientist – Director, Rural Community Health
John May, MD – Research Scientist,
Director Population Health (alternate)

• Research design

Paul Jenkins, PhD – Director, Center for Biostatistics Melissa Scribani MPH – Junior Research Investigator, Biostatistician (alternate)

- Formulating a research question
- How can the Center assist your research project

Nine residents participated in 2019

July 24: Panadeekarn "Natty" Panjawatanan

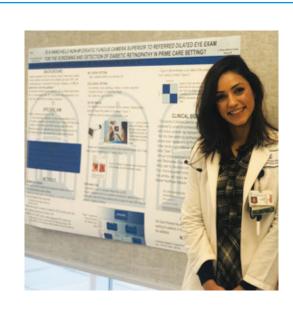
July 31: Anjeela Kadel

August 7: Ratdanai "Dan" Yodsuwan

August 14: Marat Mavliutov

August 28: Mwengwe "Mimi" Ndhlovu

September 4: Yuri Choi September 11: Sugam Gouli September 18: Azkia Khan November 20: Arpitha Kamala



Konika Sharma, MD – was the EDT winner for Outstanding Resident Research Award

for 2019 for her study-poster. Cooperstown, NY – May, 2019.

COLUMBIA-BASSETT MEDICAL SCHOOL STUDENT RESEARCH





All listed activities are for the period January 1, 2019 through December 31, 2019

Transgender Elder Study – Special needs theory posits that aging brings unique challenges for LGBT people. Using community based participatory research principles of research, we consulted with CREATE, a transgender community advisory group of the Gender Wellness Center (GWC). Given the lack of information about transgender elders, the CREATE group identified a need for an exploratory study that would assess both the special needs and generic age-based needs of transgender elders. By connecting with and interviewing members of the transgender elder community, the information gathered will fill in the gaps in

current research. Transgender people who are 65+ years of age and live independently or in assisted living, were interviewed by **Mathew Adan**, a **CB medical student**, and Nancy Tallman, an experienced research assistant. The interviews were recorded, transcribed and de-identified prior to analysis using NVIVO. All participants were offered an incentive \$25 gift cards after the interview was completed. Results are being analyzed and will be the submitted for publication in 2020.

Narrative Summary Highlights for 2019

During 2019, under the direction of Robert C. Whitaker, MD, MPH, Director of Research and Research Education Columbia-Bassett, the research program set up the computing infrastructure required to secure research data and obtain remote access to those data for students and staff.

Our research program shifted its focus from data collection activities to publication, ending a randomized trial of a professional development course ("Enhancing Trauma Awareness") and reporting on the results. We also began disseminating work on the life-course development of human flourishing — our major thematic focus moving forward. Three Columbia-Bassett students from the class of 2022 assisted us during the summer of 2019.

Medical Student Research Mentorship

Summer 2019 **Ryan Huff**, Columbia-Bassett Program, [Dispositional mindfulness and fatigue]
Summer 2019 **Liam Heneghan**, Columbia-Bassett Program, [Dispositional mindfulness and fatigue]

Summer 2019 Kenneth Hubbell, Columbia-Bassett Program, [Dispositional mindfulness and fatigue]

COLUMBIA-BASSETT MEDICAL SCHOOL STUDENT RESEARCH



We had five peer-reviewed publications:

- 1. A publication in *JAMA Network Open* reported the primary findings from our randomized trial of "Enhancing Trauma Awareness." Three Columbia-Bassett students from the class of 2021 served as co-authors. A second paper from the trial is under review at *Child Abuse & Neglect*.
- 2. A publication in *Child Abuse and Neglect* (in press) that provided interpretation of the qualitative evaluation that was part of trial to assess "Enhancing Trauma Awareness."
- 3. A publication in Health Affairs was our first on the life-course development of flourishing.
- 4. A publication in *Sleep Health* completed our reporting on a quasi-experimental impact evaluation of school start time changes in Fairfax (VA) County Public Schools, the 9th largest school district in the United States.
- 5. A publication in *Preventive Medicine* reported on the association between fatigue and dispositional mindfulness. This was the seventh paper published from data collected in the 2012 Pennsylvania Head Start Staff Wellness Survey. Three Columbia-Bassett students from the class of 2022 served as co-authors.

Included in our eight presentations this year were those that focused on flourishing in the context of adversity — an invited presentation at the Carolina Consortium on Human Development and two papers selected for oral presentation at national meetings (American Public Health Association and Pediatric Academic Societies).

SUMMER INTERNS 2019



Molly Mooney joined the Clinical Research team in June 2019. Molly has returned to the BRI the past three summers working with our Clinical Research Center nurses. She returned to Le Moyne College as a senior.



Jessica Klem returned to Nazareth College in the fall as a second year student. She assisted the Living Well Team during the 2019 summer months.



John Kelly joined the Statistical Center Team in June 2019. John returned to University of Rochester in the fall as a second year student.



NFW STAFF 2019



Christen Turner started January 7, 2019, began work at the BRI as our IRB Coordinator. She will be working closely with Heidi Johnson and Dr. David Strogatz.



Pamela McCabe began February 6, 2019 as a Research Assistant I to assist with the LongROAD studies.



Jennifer Flynn started January 28, 2019 as the Research Assistant II with the Center for Rural Community Health. She assists with the Living Well Program.



We welcomed **Carleen Henderson** on June 10, 2019
to the Community Health
team as a Health Educator.
Carleen is conducting Living
Well classes.



Alexis Bloomfield started February 25, 2019 as a Health Educator with the Center for Rural Community Health. She provides support for the Living Well Program and other community health initiatives.



Welcome to **Wendy Brunner**, **PhD**, on July 15, 2019 who is our new Deputy Director, Center for Rural Community Health.



William Eger joined the BRI March 4, 2019. He worked on the FALLS Study with Dr. Strogatz through the summer of 2019. He then resumed his studies at Hartwick College.



Linda Henderson joined the BRI team on October 21, 2019 as the Executive Assistant in the Research Department.



Caitlin Liberati joined the Research team May 1, 2019 as the Department Coordinator, Research Operations. Caitlin is assisting the Administration team.



On December 2, 2019, we welcomed **Amanda Roome**, PhD Biological Anthropology, with Research focus on Tick Bourne Disease.



Peggy Cross Joined on May 11, 2019 in the Center for Clinical Research as a Research Assistant II Peggy brought a wealth of experience from the Cardiology department.



Bassett Healthcare Network
Bassett Medical Center

TRANSITIONS 2019

DEPARTING STAFF 2019

- **Katelyn Tessier** left March 15, 2019 to accept a position in the Cancer Center here on campus.
- **Arpitha Nanjappa** left the BRI on March 22, 2019. Arpitha has matched with Bassett's Residency Program and began her residency in June 2019. Congratulations Arpitha.



Christine Burrington – retired July 2019, after nearly 34 years at the BRI. She was the 5-2-1-0 program coordinator. We wish her well and much fun in her retirement.



Beth Worden retired October 31, 2019 from her role as Executive Assistant after nearly 27 years at Bassett.

- Allison Corsi left July 2019
- Barbara Doyle left August 2019
- Merle Myerson, MD left October 2019, relocated to Dartmouth.

PROMOTIONS 2019

- **Mindy Robinson** leaving LongROAD, transferred to her new position as Research Assistant II, working with CERI and other areas.
- Alexis Bloomfield was promoted from Research Assistant I to Health Educator I.



PUBLICATIONS 2019



BRI Bulletin Board featuring 2019 publications "clothes line"

- 1. Arnhart K, Privitera MR, Fish E, Young A, Hengerer AS, Chaudhry HJ, Dowling F, **Gomez-DiCesare C**, Atallah F, Staz M. Physician burnout and barriers to care on professional applications. *Journal of Legal Medicine*. 2019;39(3):235-246. doi: 10.1080/01947648.2019.1626364.
- 2. Belay ES, Wittstein JR, Garrigues GE, Lassiter TE, **Scribani M**, Goldner RD, Bean CA. Biceps tenotomy has earlier pain relief compared to biceps tenodesis: a randomized prospective study. *Knee Surgery Sports Traumatology Arthroscopy*. 2019 Sept 5. https://doi.org/10.1007/s00167-019-05682-1.
- 3. Bethell CD, Gombojav N, Whitaker RC. Family resilience and connection promote flourishing among us children, even amid adversity. *Health Affairs*. 2019;38(5):729-737.
- 4. Betz ME, Villavicencio L, Kandasamy D, Kelley-Baker T, Kim W, DiGuiseppi C, Mielenz T, Eby DW, Molnar LJ, Hill L, **Strogatz D**, Carr DB, Li G, on behalf of the LongROAD Research Team. Physician and Family discussions about driving safety: findings from the LongROAD Study. *Journal of the American Board of Family Medicine*. 2019; 32(4):607-613. doi: 10.3122/jabfm.2019.04.180326.
- 5. Carroll AJ, Huffman MD, Zhao L, Jacobs DR, Stewart JC, Kiefe CI, **Brunner W**, Liu K, Hitsman B. Associations between depressive symptoms, cigarette smoking, and cardiovascular health: Longitudinal results from CARDIA. *J Affect Disord*. 2019;9(260):583-591. doi: 10.1016/j.jad.2019.09.049.
- 6. Eby DW, Molnar LJ, Zakrajsek J, Ryan L, Zanier N, St Louis RM, Stanciu S, LeBlanc D, Bogard S, Kostyniuk LP, Smith J, Yung R, Nyquist L, Betz M, DiGuiseppi C, Jones V, Li G, Mielenz TJ, **Strogatz D**. Factors related to rapid deceleration events among a large cohort of older drivers. *Transportation Research Part F: Psychology and Behavior.* 2019;66:76–86.
- 7. *Edmonds PJ, **Gunasekaran K**, Edmonds LC. Neck grasp predicts obstructive sleep apnea in type 2 diabetes mellitus. *Sleep Disorders*. 2019:2019:3184382. https://doi.org/10.1155/2019/3184382.
- 8. Folta SC, Paul L, Nelson ME, **Strogatz D**, Graham M, Eldridge G, Higgins M, Wing D, Seguin RA. Changes in diet and physical activity resulting from the Strong Hearts, Healthy Communities randomized cardiovascular disease risk reduction multilevel intervention trial. *International Journal of Behavioral Nutrition and Physical Activity*. 2019;16:91.
- 9. Fulmer S, Buchholtz, **Jenkins P, Scribani M.** Injuries and exposure time lobstering in northeast us inshore lobster fleet. *Journal of Agromedicine*. 2019. https://doi.org/10.1080/1059924X.2019.1645780
- 10. Jenkins PL, Knight M, Hirabayashi L, Weil R, Echard J, Krupa N, Sorensen JA. Accelerometers: assessing their potential for measuring personal flotation use on commercial fishing vessels. *American Journal of Industrial Medicine*. 2019; 62(10):883.
- 11. Jones V, Johnson R, Rebok G, Roth K, Gielen A, Baker SP, Molnar LJ, DiGuiseppi CG, Hill LL, **Strogatz DS**, Mielenz T, Eby DW, Li G. Demographic differences in use of alternate transportation among older drivers. April 2019 AAA LongROAD Study. (Research Brief) Washington, DC: AAA Foundation for Traffic Safety.
- 12. *Kaston-Jolly J, **Yuklyaeva N, Victory J, Scribani M**, Lasek-Nesselquist E, Shahnawaz A, Raddatz D, Lawrence DA. Blockage of tumor necrosis factor α versus CD80/86 signaling on the response to influenza vaccination of rheumatoid arthritis patients. *Journal of Immunology Forecast*. 2019; 2(1):1006.
- 13. Lau BC, **Scribani M**, Lassiter T, Wittstein J. Correlation of single assessment numerical evaluation score for sport and activities of daily living to modified harris hip score and hip outcome score in patients undergoing arthroscopic hip surgery. *The American Journal of Sports Medicine*. 2019; doi:10.1177/0363546519863411

^{*}This research was funded by the E. Donnall Thomas Resident Research program

PUBLICATIONS 2019

- 14. Li G, Andrews HF, Chihuri S, Lang BH, Leu CS, Merle DP, Gordon A, Mielenz TJ, **Strogatz D**, Eby DW, Betz ME, DiGuiseppi C, Jones V, Molnar LJ, Hill LL. Prevalence of potentially inappropriate medication use in older drivers. *BMC Geriatrics*. 2019; 19(1):260. doi: 10.1186/s12877-019-1287-8.
- 15. Lo BK, Graham ML, Folta SC, Paul LC, **Strogatz D**, Nelson ME, Parry SA, Carfagno ME, Wing D, Higgins M, Seguin RA. Examining the associations between walk score perceived built environment, and physical activity behaviors among women participating in a community-randomized lifestyle change intervention trial: Strong Hearts, Healthy Communities. *International Journal of Environmental Research and Public Health*. 2019; 16:849. doi:10.3390/ijerph.16050849
- Man C, Ng LS, Molnar LJ, Eby DW, Ryan LH, DiGuiseppi C, Strogatz D, Betz ME, Hill L, Guralnik J, Crowe CL, Li G, Mielenz T. Frail phenotype and self-reported crashes and driving space: Baseline AAA LongROAD. *Journal of Transport & Health*. 2019;15: 100626. doi:10.1016/j.jth.2019.100626
- 17. Mielenz TJ, **Strogatz DS**, Eby DW, Molnar LJ, Crowe CL, Andrews HF, DiGuiseppi CG, Betz ME, Hill LL, Li G, and the AAA LongROAD team. Relationship between driving habits and health-related quality of life. April 2019 AAA LongROAD Study. (Research Brief) Washington, DC: AAA Foundation for Traffic Safety.
- 18. Mielenz TJ, Durbin L, Hertzberg F, Noble-Hernandez D, **Sorensen JA**. Fall risk reduction program paired with a transportation program in an underserved, urban minority community: a qualitative evaluation. *Journal of Aging Research*. 2019:2719290. doi:10.1155/2019/2719290
- 19. Murphy, D, Gorucu, S, Weichelt, B, **Scott, E**, Purschwitz, M. Using multiple coding schemes for classification and coding of agricultural injury. *Am J Indus Med*. 2019; 62(2):87-98. doi:10.1002/ajim.22932
- 20. Myerson M, Kaplan-Lewis E, Poltavskiy E, Ferris D, Bang H. Prolonged QTc in HIV-infected patients: a need for routine ECG screening. *J Int Assoc Provid AIDS Care*. 2019; 18:2325958219833926. doi: 10.1177/2325958219833926
- 21. Owens JA, Dearth-Wesley T, Herman AN, **Whitaker RC**. Drowsy driving, sleep duration, and chronotype in adolescents. *J Pediatr*. 2019;205:224-9.
- 22. Scott E, Hirabayashi L, Krupa N, Jenkins P. Pre-hospital care reports (PCR) as a data source for logging injury surveillance. *J Agromedicine*. 2019;24 (2):133-137. doi: 10.1080/1059924X.2019.1572558
- 23. **Scribani M**, Norberg M, Lindvall K, Weinehall L, **Sorensen J, Jenkins P**. Sex-specific associations between body mass index and death before life expectancy: a comparative study from the U.S. and Sweden. *Global Health Action*. 2019; 12:1580973. https://doi/10.1080/16549726.2019.1580973
- 24. Seguin RA, Graham ML, Eldridge G, Nelson ME, **Strogatz D**, Folta SC, Paul L. Strong Hearts for New York: A multilevel community-based randomized cardiovascular disease risk reduction intervention for rural women. *Contemporary Clinical Trials*. 2019; 82:17-24.
- 25. Sellers K, Riley M, Denny D, Rogers D, Havener JM, Rathbone T, **Gomez-DiCesare C**. Retention of nurses in a rural environment: the impact of job satisfaction, resilience, grit, engagement, and rural fit. *Online J Rural Nurs Health Care*. 2019; 19(1):4-42. https://doi.org/10.14574/ojrnhc.v19i1.547
- 26. Sorensen J, Johansson H, Jerdén L, Dalton J, Shaikh H, Jenkins P, May J, Weinehall L. Healthcare administrator perspectives on prevention guidelines and healthy lifestyle counseling in a primary care setting in New York State. *Health Serv Res Managerial Epidemiol.* 2019; 6: 2333392819862122. doi: 10.1177/2333392819862122
- 27. **Sorensen J, Weil R, Echard J, Hirabayashi L, Scribani M, Jenkins P.** Lifejackets and Lobstermen: giving safety equipment a competitive advantage. Safety science: safety at sea special issue. *J Agromed*. 2019; 24(4):381-390. doi:10.1080/1059924X.2019.1635935
- *This research was funded by the E. Donnall Thomas Resident Research program

PUBLICATIONS 2019

- 28. Sriram U, Sandreuter K, Graham M, Folta S, **Pullyblank K**, Paul L, Seguin R. Process evaluation of Strong Hearts, Health Communities: A rural community-based cardiovascular disease prevention program. *J Nutr Educ Behav.* 2019;51(2):138-149.
- 29. Talwar A, Mielenz T, Hill LL, Andrews HF, Li G, Molnar LJ, Eby DW, Betz ME, **Strogatz D**, DiGuiseppi C. Relationship between physical activity and motor vehicle crashes among older adult drivers. *J Primary Care Community Health*. 2019; 10:2150132719859997. doi:10.1177/2150132719859997
- 30. **Tinc P, Sorensen J**. Marketing farm safety: using principles of influence to increase PTO shielding. *J Agromed*. 2019;24(1):101-109.
- 31. **Tinc P, Sorensen JA**, Weinehall L, Lindvall K. An exploration of rollover protection structures (ROPS) rebate program media coverage: strategies for implementation and sustainment. *BMC Public Health*. 2019;19:1257. doi:10.1186/s12889-019-7586-3
- 32. *Ullman D, Kotakonda S, Victory J, Scribani M. Relation of viscous lidocaine combined with propofol deep sedation during elective upper gastrointestinal endoscopy to discharge. *Proc (Bayl Univ Med Cent)*. 2019; 32(4):505-509. doi: 10.1080/08998280.2019.1641058
- 33. Wang H, Kenkel D, Graham ML, Paul LC, Folta SC, Nelson ME, **Strogatz D**, Seguin RA. Cost-effectiveness of a community-based cardiovascular disease prevention intervention in medically underserved rural areas. *BMC Health Serv Res.* 2019; 19:315. doi:10.1186/s12913-019-4117-y
- 34. Weichelt B, Heimonen T, Gorucu S, Redmond E, Vechinski J, Pflughoeft K, Bendixsen C, Salzwedel M, **Scott E**, Namkoong K, Purschwitz M, Rautiainen R, Murphy DJ. Redesigning a sentinel surveillance system for collecting and disseminating near real-time agricultural injury reports: System Usability Study. *JMIR Form Res.* 2019;3(3):e13621. doi: 10.2196/13621
- 35. *Wijarnpreecha K, Kim D, Raymond P, Scribani M, Ahmed A. Associations between sarcopenia and nonalcoholic fatty liver disease and advanced fibrosis in the USA. *Eur J Gastroenterol Hepatol.* 2019;31(9):1121-1128. doi:101097/MEG.0000000000001397
- 36. *Wijarnpreecha K, Scribani M, Kim D, Kim WR. The interaction of nonalcoholic fatty liver disease and smoking on mortality among adults in the United States. *Liver Int*. 2019; 39(7):1202-1206. doi: 10.1111/liv.14058
- 37. Whitaker RC, Herman AN, Dearth-Wesley T, Smith HG, Burnim SB, Myers EL, Saunders AAM, Kainz K. Effect of a trauma-awareness course on teachers' perceptions of conflict with preschool-aged children from low-income urban households. A Cluster Randomized Clinical Trial. JAMA Network Open. 2019;2(4):e193193. doi:10.1001/jamanetworkopen.2019.3193
- 38. Whitaker RC, Dearth-Wesley T, Herman AN, Oakes JM, Owens JA. A quasi-experimental study of the impact of school start time changes on adolescents' mood, self-regulation, safety, and health. *Sleep Health*. 2019;5(5):466-469. doi:10.1016/j.sleh.2019.06.011
- 39. Whitaker RC, Herman AN, Dearth-Wesley T, Hubbell K, Huff R, Heneghan LJ, Rowe PC. The association of fatigue with dispositional mindfulness: relationships by levels of depressive symptoms, sleep quality, childhood adversity, and chronical medical conditions. *Preventive Medicine* 129 (2019) 105873, journal homepage: www.elsevier.com/locate/ypmed. https://authors.elsevier.com/a/1Z~OnKt2puET6.
- 40. Zanier N, Eby DW, Zakrajsek J, Ryan L, St.Louis RM, Sergiu S, LeBlanc D, Kostyniuk LP, Smith J, Yung R, Nyquist L, DiGuiseppi C, Li G, Mielenz TJ, **Strogatz D**. Improving safe mobility: an assessment of vehicles and technologies among a large cohort of older drivers. *Occup Ther Health Care*. 2019;33(1):1-21. doi: 10.1080/07380577.2018.1528653
- *This research was funded by the E. Donnall Thomas Resident Research program

2019 PRESENTATIONS

- Seguin R, Folta S, Marshall G, Graham M, Strogatz D. "The Effect of a Community-Based Healthy Lifestyle Behavior Change Program on Simple 7 Score among Rural Women." Annual Meeting of the American Heart Association Council on Epidemiology and Prevention, Houston, TX, March 2019.
- Strogatz D. "Overview of the LongROAD Study: A Panel Presentation for Practitioners in Aging & Mobility." Lifesavers National Conference on Highway Safety Priorities, Louisville, KY, March 2019.
- Strogatz D. "LongROAD: the Largest Naturalistic Driving Study of Older Adults Ever Conducted." Friends of the Village Library Lecture Series, Cooperstown, NY, June 2019.
- Strogatz D. "The LongROAD Study: Recent Findings and A Possible New Direction." Research Seminar, Bassett Research Institute, Cooperstown, NY, August 2019.
- Crowe CL, Andrews H, Molnar LJ, Eby DW, DiGuiseppi C, Strogatz D, Li G, Mielenz TJ and the LongROAD Study Team. "The Association between Lower Extremity Function, Frailty and Low-Mileage Driver Status among Older Adults." Annual Meeting of the Gerontological Society of America, Austin, TX, November 2019.
- Anne Gadomski, MD MPH, Kimberly Leon, Jane O'Bryan MPH, Melissa Scribani, MPH, Nancy Tallman, Carolyn Wolf-Gould, MD. Health Related Quality of life Measures among Rural Transgender and Gender Expansive Youth. National LGBTQ Health Conference, Emory University, Atlanta, GA, May 31, 2019.
- Jane O'Bryan MPH, Melissa Scribani MPH, Kimberly Leon, Nancy Tallman, Carolyn Wolf-Gould MD, Anne Gadomski MD, MPH. Quality of Life Measures Among Transgender and Gender Expansive Youth at a Rural Gender Wellness Clinic. Pediatric Academic Societies meeting, Baltimore, MD, April 4, 2019.
- Scribani M, O'Bryan J, Tallman N, Wolf-Gould C, Gadomski A. "Mental Health Quality of Life Measures Among Rural Transgender and Gender Expansive Youth." Oral presentation at the 32nd Annual Research and Policy Conference on Child, Adolescent, and Young Adult Behavioral Health, Tampa, Florida, March 5, 2019.
- Ratliff K. Myerson M. Use of American Heart Association Recommendations for Pre-Participation Screening in New York State High Schools. New England Chapter of American College of Sports Medicine. Providence, RI, November 7, 2019.

2019 SPECIAL RESEARCH, GRAND ROUNDS

Flourishing with Adversity: The Well-Being of US Children

Bassett Research Institute
Cooperstown, NY
September 17, 2019

Robert C. Whitaker, MD, MPH
Director of Research & Research Education
Columbia-Bassett Program

A Randomized Trial of a Professional Development Course to Increase Trauma-Informed Care

> Bassett Research Institute Cooperstown, NY March 19, 2019

Robert C. Whitaker, MD, MPH Allison N. Herman, M.Ed., MPH Tracy Dearth-Wesley, PhD, MPH Columbia-Bassett Program



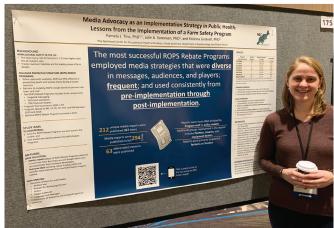
Robert C. Whitaker, MD, MPH robert.whitaker@bassett.org



2019 LECTURES AND PRESENTATIONS

In December 2019, the newly minted Dr. Pam Tinc had two presentation at the annual Academy Health *Implementation and Dissemination* meeting in Arlington, VA. One was a poster on the impact of media advocacy on the ROPS Rebate Program and the other was an oral presentation titled "Applying the CFIR to the Implementation of a Center of Excellence in Transgender Health" (see CERI page 27).





MEDIA COVERAGE

Wyckoff L. "Pain Relief help offered by Bassett." The Daily Star, Oneonta, NY, February 15, 2019.

Sorensen J. "Researchers launch lifejacket vans; goal is making lifejacket use easy and affordable for lobstermen." Commercial Fisheries News magazine Vol 46, number 6, February 2019 issue.

Strogatz D. "Bassett Research Institute to Provide Data for Study on Older Drivers Through 2022." Bassett Works, Cooperstown, NY, March 5, 2019.



Strogatz D. "Bassett research looks into effects of aging on drivers." The Daily Star, Oneonta, NY, March 12, 2019.

Strogatz D: "Study backs beliefs about older drivers." Observer-Dispatch, Utica, NY, March 24, 2019.

Wyckoff L, Living Well Team. "Chamber to honor Pathfinder, funeral director." The Town Crier, Cooperstown, NY, April 4, 2019.



Sorensen, J, Weil, R, Graham, J. "A Fitting Strategy To Save Loberstermen's Lives." Forbes, April 9, 2019.

Flotation device researchers Julie Sorensen, Rebecca Weil and Judy Graham (left to right) get feedback from lobstermen Jeremiah Felix, Bryan Butler and Tim Butler in Seal Cove, Maine. Northeast Center for Occupational Health and Safety.



Lally E, Roome, A, "Jackets for Safe Lobstering." Gloucester Daily Times, Manchester, Maine, July 4, 2019.

Echard J. "Nonprofit creates life jackets designed for loberstermen." Channel FOX 22, Bangor, Maine, September 19, 2019.

Hohensee T. "Farm to School—Firmly Rooted and Thriving at Sidney Central School." Presented to the NYS Senate, SUNY Research Foundation News Letter, October, 2019.

Sorensen J, "Group returns to Cape Ann with lifejackets next month." Gloucestertimes.com, Maine, October 22, 2019.

Brunner, Wendy. "The dangers of vaping may not be fully known." The Daily Star, Edition 11/25/2019, C: Lifestyle, Your Health, 11/23/2019 page .C002. https://www.thedailystar.com/news/lifestyles/your-health-the-dangers-of-vaping-may-not-be-fully/article_55eec87d-64dd-52ae-951a-ede6a2f347df.html

