GP PBRN Board of Directors Meeting

April 13th, 2021

Attendees: Jeffrey Harrison, Paul Estabrooks, Dave Palm, Dillon Savard, Ladonna Hart, Pam Flax-Laws, Emily Frankel, Matt Rizzo

Agenda:

1. Approval of March 9th meeting minutes
2. Network Research Update
   1. Project #1: Understanding adoption decisions for weight management programs in clinical and community settings
      1. Attribute-based choice design survey in part with primary care practitioners to identify characteristics of technology implemented weight management programs that would lead to a positive adoption in the clinic
      2. IRB documents submitted a week ago, waiting on approval
      3. PBRN will send an introductory email before UNL’s survey center distributes the survey
   2. Project #2: Proposal development: Improving reach and retention for technology-enhanced weight management programs introduced in the primary care setting
      1. Aiming for July submission of grant
      2. When the Post-Doc has her aims complete, she will have the board review
      3. The PBRN board will then write a letter of support once in agreement with the aims
   3. Project #3: Preconception health survey for patients
      1. Board will review materials once the investigator has them completed
      2. Not much to report since April meeting
3. Project ECHO and Quality Improvement (QI)
   1. Review the principles of ECHO
      1. Utilizing technology to disseminate knowledge and case-based learning presentations to guide best practices to reduce disparities.
   2. Article presentation: Enhancing Collaborative Learning for Quality Improvement: Evidence from the Improving Clinical Flow Project, a Breakthrough Series Collaborative with Project ECHO
      1. Article attached to email and archived here: <https://gpctr.unmc.edu/ctr-resources/pbrn/board-of-directors-documentation-and-resources/>
4. Interoperability Conference
   1. May 11th and 12th
   2. Opportunity presented by the Great Plains IDeA-CTR, UNMC Bioinformatics, CyncHealth, and others
   3. The goal of the conference is to promote health research using EHR-based data
   4. PBRN was asked to present on our efforts linking EHR and research and future goals
   5. Linking EHR with the PBRN:
      1. Bioinformatics core at UNMC is able to move clinical data into a data warehouse using the CRANE model
      2. Allows for research to be done on clinical data
      3. Data can be structured and harmonized to conduct research with other healthcare systems and HER platforms across the country (i.e. N3C, National COVID Cohort Collaborative)
      4. PBRN is starting with network sites that are already on EPIC, gauging interest in this effort
      5. Expanding registries to include EHR data in a federated model to supplement registry self-report data
      6. Current bottlenecks:
         1. Challenges in harmonizing data-not all instances of Epic (EHR) are the same
         2. Evaluating interest at network sites and executing DUA
         3. How to link with sites who are not on Epic, potentially through CyncHealth
   6. Note: CHI and Children’s Hospital are Epic users-consider linking with these entities
5. IDeA-CTR Annual Scientific Meeting
   1. October 6th and 7th
   2. Opportunity to interact with members across the region
   3. Keynote speaker, poster presentations, posters on cores/facilities, CTR Superstar (research pitches similar to Shark Tank)
   4. We would like to invite the PBRN members to the conference
      1. Host a networking session (ex. combining PBRN and CAB), breakout sessions, primary session on value of PBRNs and future directions, etc.
6. Schedule Next Meeting
7. Adjourn

Next meeting: In May

Doodle Poll: <https://doodle.com/poll/r79dhyn9kydkp9kz?utm_source=poll&utm_medium=link>

PBRN Board of Directors Document Repository: <https://gpctr.unmc.edu/ctr-resources/pbrn/board-of-directors-documentation-and-resources/>