

The State of the Department of Quantitative Health Sciences (QHS) at 9 years of age

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September 21, 2018



State of QHS 2018: Overview

- Brief history
- Research highlights
- Preventive and Behavioral Medicine
- Educational programs
- Challenges for FY18 and beyond

History

- Founded in June 2009
- Moved into ~24,000 sq. ft. across 5 floors in new Sherman building, May 2013
- “Five-year” review report November 2015

“QHS has been extraordinarily successful by any metric for success”

Mission and Vision

As a result of recently initiated strategic planning efforts and in response to your feedback, we are:

- Reformulating our Mission and Vision statements
- Discussing how to change our Department's name
- Reformulating our goals and objectives

Stay tuned and continue to provide input

Values

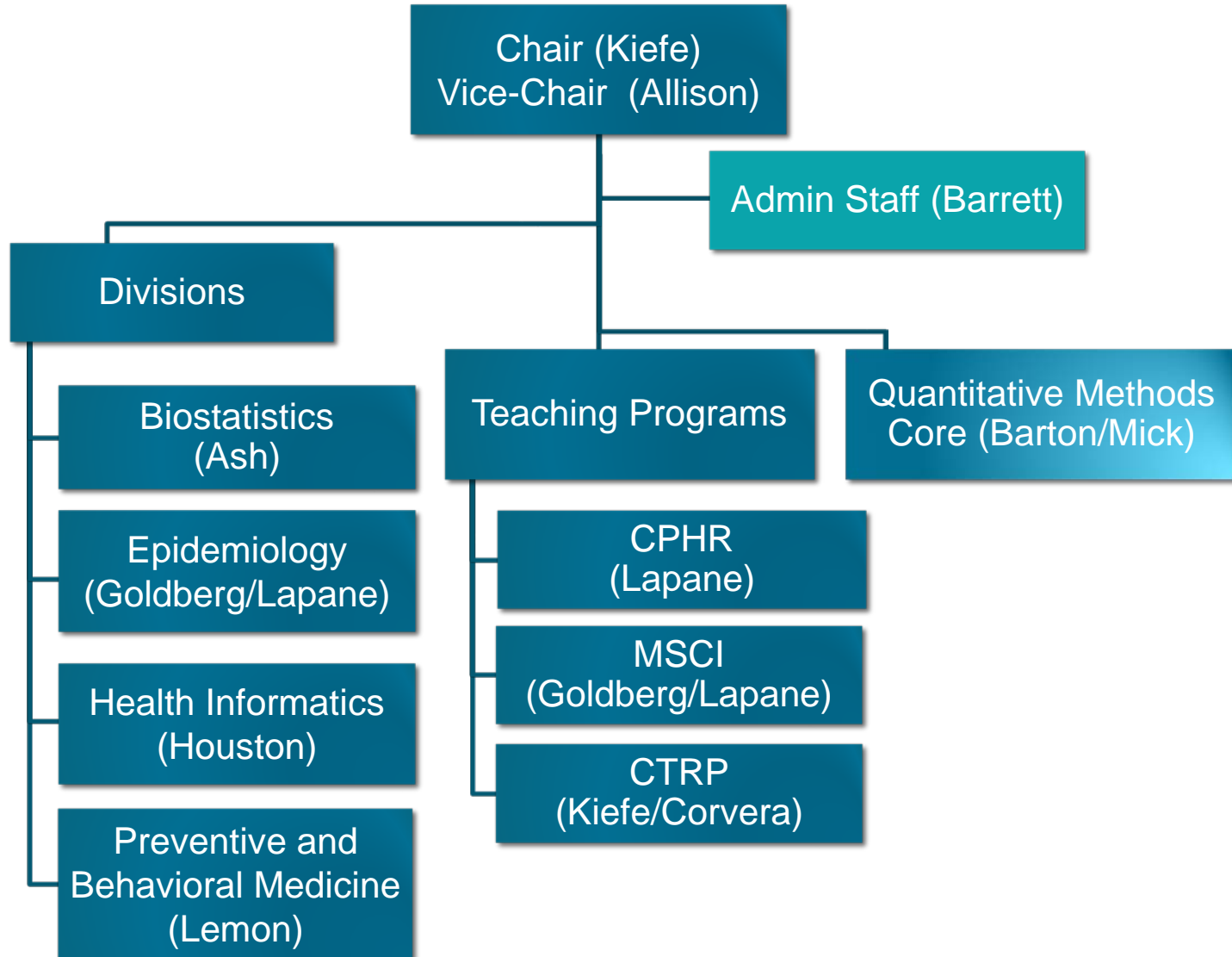
- **Health equity** and social justice
- Collective creativity
- Integrity and excellence
- Diversity and mutual respect
- Science that makes a difference

Additional values incorporating **collaboration** and **growth/fulfillment** are being articulated

Which of our values is in this picture?



Dept. of Quantitative Health Sciences Organizational Chart



Major changes from last year

- Chair stepping down **7/1/2019**
 - Dean very positive about 9-year accomplishments; wishes to accomplish smooth transition into similar and rejuvenated direction
- Division of Epidemiology Chief changing 12/1/2018
- Division of Outcomes Measurement has “sunset”
- PBM, formerly in Dept of Medicine, is new and vibrant addition to our Department

Our People

- 40 primary faculty
- 31 secondary faculty
- 26 voluntary or adjunct faculty
- 25 doctoral students, 8 post-docs
- 54 staff
 - 12 administrative
 - 42 research

Staff: the glue that holds us together

- 12 administrative staff
 - 5 financial: O'Reilly, Thompson, Wiggin, Yeboah, **McNally**
 - 7 other: Baron, **Falla**, Manning, McDonald, **Raymond**, Saber, Stankus
- 42 research staff
 - Quantitative Methods Core technical staff
 - Statistical computing: Ayturk, Flahive, **Frisard**, Kroll-Desrosiers, Lessard, **Min**, **Morrison**, Williams
 - Data architecture and management: Lazar, Netherton, Orvek, Rosenberg, **Rumbut**
 - 29 project managers, research associates, specialists, ...
 - New since last year: **A. McDonald**, **Mcnamee**, **Puerto**, **Sawicki**
 - Current program managers/project directors: Chiriboga, **Druker**, **Estabrook**, Gigliello, **Goins**, **Seward**, **Vitali**, Yarzebski, **Wijesundara**

Our people ...



Strategic planning

- Strategic plan in 2010, updated 2014
- New effort in progress
 - Aligned with UMMS 2018-19 strategic planning
 - Initiated July 2018 with outside consultant
 - Survey of all QHS faculty, staff and students:
 - 12 Likert scale ratings (scale 1-5) and/or open responses
 - 4 focus groups, 8 one-one interviews
 - Survey response rate :
 - 75/112 (67%) overall
 - 40/42 (95%) primary faculty

Strategic planning: preliminary findings

- Mean overall rating, scale of 1 – 5, in seven specific areas
 - Mission, Vision, Values, Leadership, Work Valued, Role Clarity: 4.1 - 4.3
 - Communication: 3.6
- Strengths
 - Passion for work, value of social justice, diverse expertise, accessible leadership, respectful environment, training and mentoring
- Areas for Improvement
 - Communication, collaboration across Divisions and UMMS, staff development, workload management

More to come: results will be shared and input will be requested through Divisions/Units

Strategic planning...



Research portfolio

- Since its inception, we have been PIs on 132 extramurally funded projects worth \$97.3 million (excluding PBM)
 - 45 currently active (\$40.8 million total costs)
 - PBM has added 16 currently active projects (\$18.7m) for total of \$59.5m
 - Plus active VA grants and contracts (~ \$10 million)
- Our faculty have been key on many others: CTSA, FORCE-TJR, PRISM, Hepatitis-C, ED-SAFE, Neonatal Abstinence Syndrome, Tay- Sachs Disease, etc.
 - Grant funding impact of QHS on UMMS ~\$160+ million
 - FY18 non-QHS PIs 41 have active projects with QHS investigators
- Quantitative Methods Core (QMC) has collaborated with *a//* UMMS departments, Tufts Vet School, other UMass campuses, and industry
 - 1900+ initial consults with 675+ investigators
 - 500+ grant applications (~85% NIH or other federal)

Our grant success rate is the highest it has ever been...

- During FY18, QHS PIs submitted 26 grants for extramural funding
- 18 have been funded, 4 not funded
- 4 still pending funding decision
- **Success rate** $18/22 = 82\%$
- Depending on how 4 still pending fare, could be
 - 69% (lowest possible) - 85% (highest possible)
- Compare to NIH pay- lines ~ 12- 16%!

Other collaborative ties

- VA: multiple faculty and staff hold joint appointments, IPAs, and are funded through VA projects
- Commonwealth Medicine, projects for MassHealth:
 - Independent evaluators for \$1.8 billion 5-year Medicaid reform
 - Building payment formulas and performance measure that take into account social risk factors
- Multiple collaborations with other state and municipal entities
 - Summarized in PBM presentation
- Collaborations with other UMass campuses
 - E.g. UMass Amherst (Bo Zhang)

Selected new grants awarded in kind **FY 2018:** first in kind

- **NIH R21: Anticoagulant Use, Safety, and Effectiveness for Ischemic Stroke Prevention in Nursing Home Residents with Atrial Fibrillation.** 8/1/2018-4/30/2020, Matthew Alcusky, PI
- **NIH R01: Person-Centered Approaches for Understanding Suicidal Ideation and Behaviors Among Nursing Home Residents.** 6/1/2018-5/31/2022, Christine Ulbricht, PI
- **AHRQ R01: Multi-state, Mixed-Methods Evaluation of the Uptake of New Direct Acting Antiviral Regimens for the Treatment of Hepatitis C Virus.** 9/1/2018-7/31/2022, Karen Clements, PI
- **QUERI: Innovators Network-Population Factors, Organizational capacity, Workflow and Resources (IN-POWR) Evaluation of the VA Innovators Network.** 4/1/2018-3/30/2021, Sarah Cutrona, MPI

Selected new grants awarded in **FY 2018**

- NIAAA U24: **Alcoholic Hepatitis Network Data Coordinating Center**; 8/1/2018-6/30/2024, Bruce Barton, PI
- NHLBI R01: **National Implementation of FOYC+CImPACT in the Bahamas: implementation strategies and improved outcomes.** 8/1/2018-3/31/2023, Bo Wang, PI
- NCATS U01: **Translating Research Into Practice: A Regional Collaborative to Reduce Disparities in Breast Cancer Care.** 8/1/2017-7/30/2022, Stephenie Lemon, UMMS PI
- R01: Jewish Community Housing for the elderly. **Affordable Senior Housing Project.** 7/1/18-6/30/19, Melissa Clark, PI

New grants in Vietnam awarded in **FY 2018**

- Fogarty R01. **mHealth Messaging to Motivate Quitline Use and Quitting (M2Q2): RCT in rural Vietnam.** 8/22/17-6/30/22, Tom Houston, PI
- NHLBI U01: **Đương đầu với bệnh Tăng huyết áp ở Việt Nam: Giải pháp từ Y tế cơ sở (Conquering Hypertension in Vietnam: Solutions at Grassroots level).** 9/1/2017-5/31/2022, Jeroan Allison, UMMS PI
- Fogarty R21: **The Northern and Central Vietnam Heart Attack Study.** 8/15/2018-4/30/20120, Hoa Nguyen

Where is this?



Out of >150 publications since January, 2017, many speak directly to our values. Examples:

Health Equity and Social Justice

- **Nobel L, Jesdale WM, Tjia J, Waring ME, Parish DC, Ash AS, Kiefe CI, Allison JJ.** Neighborhood Socioeconomic Status Predicts Health After Hospitalization for Acute Coronary Syndromes: Findings From TRACE-CORE. *Med Care*. Dec 2017 55(12):1008-1016

Collective Creativity

- **Soni A, Fahey N, Jaffe A, Raithatha S, Raithatha N, Prabhakaran A, Moore Simas TA, Byatt N, Vankar J, Chin M, Phatak AG, Srivastava S, McManus DD, O'Keefe E, Patel H, Patel N, Patel D, Tracey M, Khubchandani JA, Newman H, Earon A, Rosenfield H, Handorf A, Novak B, Bostrom J, Deb A, Desai S, Patel D, Nimbalkar A, Talati K, Rosal M, McQuilkin P, Pandya H, Santry HP, Thanvi S, Kharod U, Fischer M, Allison J, Nimbalkar SM.** RAHI-SATHI Indo-U.S. Collaboration: The Evolution of a Trainee-Led Twinning Model in Global Health Into a Multidisciplinary Collaborative Program. *Glob Health Sci Pract*. 2017 Mar 28;5(1):152-163

Continued: Examples of values-related papers

Integrity and Excellence

- **Powell LR, Ojukwu E, Person SD, Allison J, Rosal MC, Lemon SC.** Psychometric Development of the Research and Knowledge Scale. *Med Care*. 2017 Feb;55(2):117-124

Diversity and Mutual Respect

- Boehmer, U., **Clark, M.A.**, Heeren, T.C., Showalter, E.A. and Fredman, L. (2018). Differences in Caregiving Outcomes and Experiences by Sexual Orientation and Gender Identity. *LGBT Health*, 2018; 5(2): 112-120

Science That Makes a Difference

- **Ash AS, Mick EO, Ellis RP, Kiefe CI, Allison JJ, Clark MA.** Social determinants for managed care health in payment formulas. *JAMA Internal Medicine*. 2017 Oct 1;177(10):1424-1430

Division of Preventive and Behavioral Medicine

www.umassmed.edu/behavioralmedicine

Mission and Vision

Vision: Healthy behaviors, healthy people and healthy communities

Mission: To improve clinical and public health practice and policy through innovative and sustainable education, research, and service in preventive and behavioral medicine.

Brief History

- Established in DOM in 1983
- Moved to QHS in 2018
- Exceeded \$235 million in total funding since 1983

Current Faculty, Staff and Trainees

- 7 Primary Faculty
- 4 Adjunct Faculty
- ~20 Staff
- 4 Doctoral students and Post-docs

Psychology, Epidemiology, Nutrition, Exercise Science, Health Education, Public Health, Biostatistics

Primary Focus Areas

- Diet, Physical activity and Weight loss
- Tobacco cessation
- Mind-body medicine/Mindfulness-based stress reduction
- Disease management
 - Diabetes
 - Asthma
 - Cancer
 - CVD

Current Space

Office Space: Sherman
Center 8th floor



Research Space: Shaw
Building 2nd floor



Prevention Institute

- Demonstration kitchen
- Interview and exam rooms
- Phlebotomy lab



Center for Tobacco Treatment Research and Training (CTTRT)



Team: L. Pbert (Center Director), C. Cranos (Training Director), N. Vitali (MDPH Contract Manager); Research faculty: J. Ockene, T. Houston, R. Sadasivam, E. Boudreaux, W. Li

Mission: To reduce tobacco use locally and nationally. Accomplished through three arms of Center:

- **Research:** Inform practical, real-world treatment models, training of health care providers, and tobacco control policies
- **Training:** Nationally-accredited TTS Training Program (est. 1999), online and in-person trainings; >8,000 trained nationally/internationally
- **Public Service:** Contract with MDPH and MTCP (1993) to provide training and TA to support state efforts to address tobacco dependence

The Center for Applied Nutrition



Team: B. Olendzki
(Director), V. Andersen, J.
Fournier

Mission: To use food
for preservation of health,
and treatment of chronic
disease.

- Research, education, and clinical care in patients with inflammatory bowel disease, diabetes, obesity, cardiovascular disease, food allergies, cancer, and more.
- Nutrition assessment
- Educational cooking classes in the teaching kitchen

UMass Worcester Prevention Research Center (PRC)



Team: S. Lemon and M. Rosal (Directors), A. Borg, K. Goins, K. Ronayne, C. Frisard, J. Ockene, L. Pbert

Mission: To promote health and prevent disease and disability through: ***real-world community engaged*** research, evidence-based practice, and education.

We accomplish our mission by being:

- 1) a ***leader*** in community health research at UMass Medical School,
- 2) an integral part of ***Greater Worcester's collaborative public health system***,
- 3) a ***research partner*** that addresses real-world challenges across Massachusetts,
- 4) a ***national model*** for research that connects academia, public health, community and health care systems.

Funder: CDCU48DP005031

Healthy Kids & Families,™

Overcoming Social, Environmental and Family Barriers to Childhood Obesity Prevention



Team: M. Rosal (PI), A. Borg, T. Land, S. Lemon, W. Li, K. Kane, L. Pbert, M. Sreedhara, A. Lopez, A. Aguirre

Intervention: Community health worker (CHW)-delivered intervention aimed at helping families overcome barriers to childhood obesity prevention. Bilingual (English/Spanish).

Comparison: CHW-delivered intervention aimed at helping families improve positive parenting skills.

Aims:

- 1: To determine the effectiveness of the intervention on child physical activity, healthy eating, BMI and utilization of built environment resources.
- 2: To determine the effectiveness of the intervention on parent physical activity, healthy eating, BMI.
- 3: To examine the potential scalability of the intervention guided by the RE-AIM model.

Participants: 248 parent-child dyads recruited from 9 schools in Worcester

Partners: Oak Hill Community Development Corporation, Worcester Public Schools

Funder: CDC, part of the UMass Worcester Prevention Research Center



MSWeight

Weight Management Counseling in Medical Schools: A Randomized Controlled Trial



Team: Principal Investigator: Judy Ockene, Investigators: Karen Ashe, Linda Churchill, Sybil Crawford, Chris Frisard, Alan Geller, Denise Jolicoeur, Mukti Kulkarni, Barbara Olendzki, Lori Pbert, Jyothi Pendharkar

Aims

1. Compare the effect of MSWeight to traditional education on weight management counseling (WMC) skills of medical students (1° outcome) as measured by an objective OSCE and student perceived WMC skills/self-efficacy (2° outcome)
2. Examine the influence of individual, interpersonal, and institutional factors as mediators on objective WMC skills and self-perceived WMC skills
3. Evaluate the feasibility (student participation, fidelity, barriers and facilitators) and acceptability (student satisfaction, engagement) of each MSWeight component to consider in future medical school curriculum dissemination

MSWeight Intervention

Training/education of medical students in WMC using a multi-modal curriculum: web-based course, role play, web-patient encounter and enhanced clerkship experience

Funding: MSWeight (5R01CA194787): National Cancer Institute (12/14/2015-11/30/2020)

Asthma Symptom Management through Mindfulness Training: A Multi-Site RCT

Team: L. Pbert and J. Carmody (PIs), S. Druker, D. Simone, M. Madison, W. Li, K. Kane, C. Bibeault

Design: RCT with 254 adults with documented asthma from patient population of UMMHC and Miriam Hospital. Respiratory and psychosocial assessments at baseline, 6- 12-, and 18-months post-baseline.

Primary Objective: Compare effect of MBSR in improving asthma control compared to a healthy living course (HLC) control program at 18-month follow-up.

Secondary Objectives:

- Asthma-related quality of life (AQoL)
- Respiratory interoceptive accuracy and its mediating effect on asthma control, AQoL, and medication use
- Lung function assessed by change from baseline in 2-week average morning peak expiratory flow (PEF), and spirometry (Forced Expiratory Volume in 1 second (FEV₁))
- Cost-effectiveness in asthma control and management

Interventions:

MBSR: 8 weekly group sessions (2 ½ hours each) plus all-day retreat; formal training in mindfulness through: (a) body scan, (b) sitting meditation, (c) mindful stretching exercises. Focus is on integrating mindfulness into their lives and the stressful situations they encounter.

Control (HLC): 8 weekly group sessions (2 ½ hours each) plus all-day retreat to control for non-MBSR-specific factors; lectures and discussions re: health related topics (e.g., healthy nutrition, PA/fitness, sleep, coping with stress (not mindfulness), balancing work and personal life, living a drug-free life).

Funder: NIH/NCCIH R01AT008393

Pediatric Practice-based Obesity Intervention to Support Families



Team: L. Pbert (PI), S. Druker, J. Hazelton, B. Olendzki, V. Andersen, S. Crawford, C. Frisard, J. Bram, A. Geller, K. Clements, C. Bibeault

Design: 5-year cluster RCT, 16 MA pediatric practices, 512 families (children 8-12 w/OW or OB)

Interventions:

Fitline™ Coaching: Pediatric practice-based component: Assess/document BMI, healthy habits screener, brief provider-delivered tx; referral to Fitline™ coaching; Parent support component: 8 weekly coaching calls to set goals, make AAP-recommended lifestyle changes + parent booklet

Fitline™ Materials: Same pediatric practice-based component and parent booklet materials mailed over 8 weeks, but no referral to Fitline™ coaching

Aims:

1. Determine effectiveness of Fitline™ Coaching in reducing BMI z-scores in children with OW and OB compared to Fitline™ Materials (12 mos.)
2. Determine effectiveness of Fitline™ Coaching in improving child's diet and PA
3. Explore possible mechanisms of effect of Fitline™ Coaching on BMI, diet and PA
4. Estimate cost-effectiveness of two interventions in terms of cost per reduction in child's BMI

Partner: American Academy of Pediatrics (AAP)

Funder: NIH/NHLBI R01 HL130505

Collaborative Grants with Others in QHS



STRIDE

Strengthening Translational Research In Diverse Enrollment

MCCISS

Massachusetts Consortium for
Cardiopulmonary Implementation



CENTER FOR CLINICAL AND TRANSLATIONAL SCIENCE

PRACCTIS

Prevention and Control of Cancer:
Post-Doctoral Training in
Implementation Science



CHEIR

The UMass Center for Health Equity Intervention Research

Examples of Our Impact

Institutional

- Integrating mindfulness, tobacco and nutrition training in programs for providers, residents and students
- Farmers Market

Local and State

- Coalition for a Healthy Greater Worcester/Community Health Improvement Planning
- MDPH School Health Tobacco Dependence Treatment
- MDPH Comprehensive Cancer Prevention and Control
- MA Prevention and Wellness Trust Fund

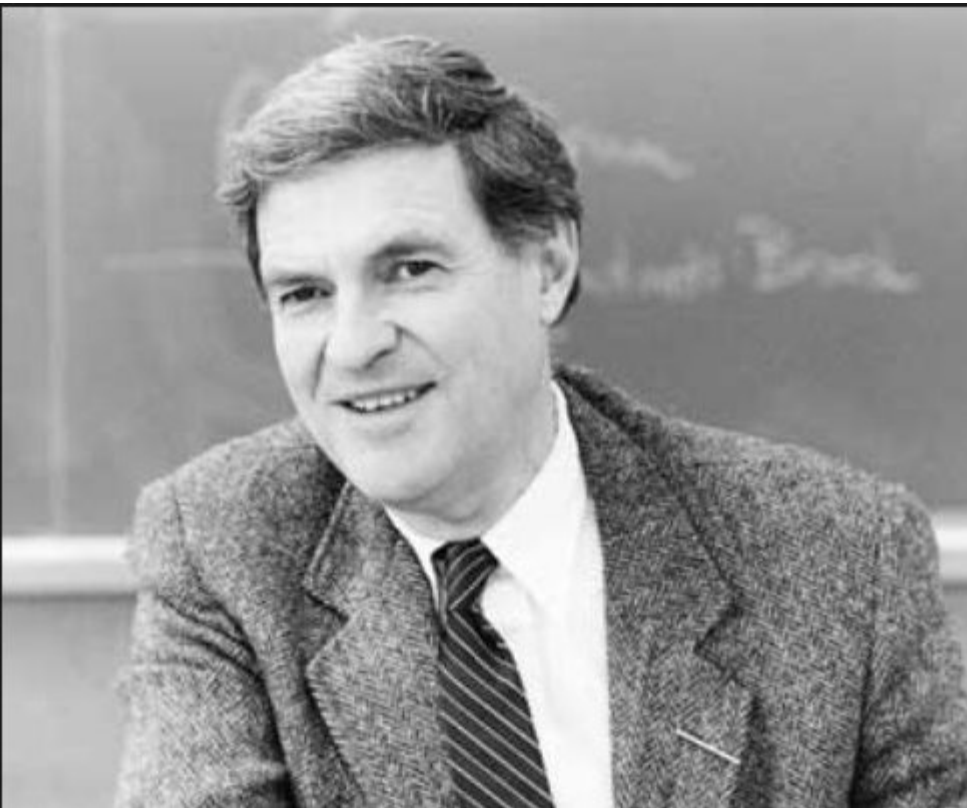
National

- 5As/Patient Centered Counseling
- USPSTF
- Tobacco HEDIS Measures
- American Academy of Pediatrics/Tobacco Treatment Guidelines
- FDA-Statin warnings for risk of elevated blood sugar



“Education is the most powerful weapon which you can use to change the world” *Nelson Mandela*





The best we ... can do is to create the most likely conditions for them to flourish, and then get out of their way.

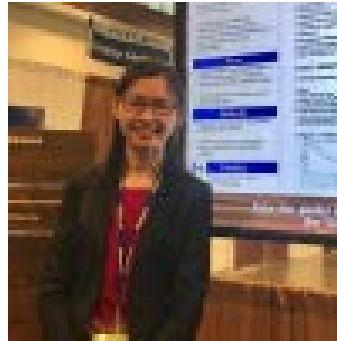
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2018 Graduates

Master's in Clinical Investigation:



Patric Gibbons,
MS, MD Student



Chau Hoang, MD, MS

**FIRST MEDICAL STUDENT TO
COMPLETE MSCII!!**

**recent PhD students, average 7
(range 5 to 15)**

PhD in Clinical and Population Health Research:



Christina Haugton, MPH, PhD
Post-doctoral Fellow
Tufts University
Mentor: Lemon



Jacob Hunnicutt, MPH, PhD
Post-doctoral Fellow
Pittsburgh VA
Mentor: Lapane



Hoang Tran, MD, MPH, PhD
Residency

Mentor: Goldberg/Kiefe



Rebecca Kinney, PhD
VA

Mentor: Person

2018 Doctoral Students Who Entered Candidacy

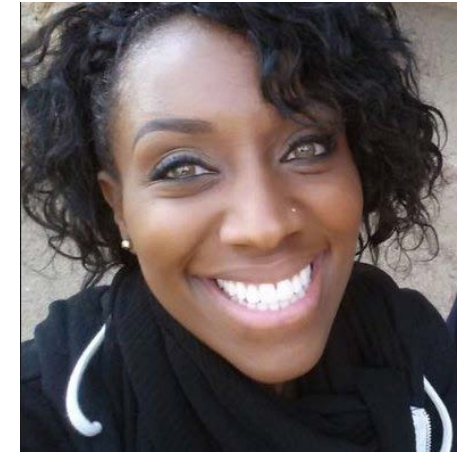
PhD in Clinical and Population Health Research:



**Hawa Abu,
MD, MPH, PhD Candidate
Mentor: Goldberg/Kiefe**



**Matthew Alcusky,
PharmD, MS, PhD Candidate
Mentor: Lapane**



**Ganga Bey, MPH
PhD Candidate (T32 Fellow)
Mentor: Person/Kiefe**



**Andrea Lopez, MS, PhD Candidate (TL1)
Mentor: Rosal**



**Deborah Mack, MPH, PhD Candidate (TL1)
Mentor: Lapane**

2018 Doctoral Students who Successfully Completed the First Major Evaluation Milestone



Ariel Becca, MS

Mentor: Lapane



Maira Casteñada, MS
TL1 Fellow

Mentor: Epstein



Eric Ding, MS
(MD/PhD) T32 Fellow

Mentor: McManus



Anny Li, MPH, MS

Mentor: Ash



Grace Masters
(MD/PhD) TL1 Fellow

Mentor: Byatt



Yiyang, Yuan, MPH

Mentor: Ulbricht

Many thanks to Mentors and Faculty Reviewers:

Jonggyu Baek

Bruce Barton

Carol Curtain

Sybil Crawford

Bill Jesdale

ShaoHsien Liu

Eric Mick

Sharina Person

New Students in QHS Educational Programs

Master's in Clinical Investigation New Class:

Mayuko Itofukunaga, MD (K12 Scholar)

Mentor: Houston

Susanna Hill, MD

David Meyer, MD

Andriana Foiles Sifuentes, PhD (TL1 Scholar)

Mentor: Tjia

PhD in Clinical and Population Health Research First Year Class:

Bunmi Emidio, MD, MPH

Mentor: Lemon

Divya Sridharmurthy, MD, MPH

Mentor: Liu / Lapane

Catherina Nagawa, MS

Mentor: Sadasivam / Houston

Danni Zhao, MS

Mentor: Lapane

NIH Training Grants

New in 2018!

NIH PREP program – Pathway to graduate school (Lapane/Lewis)
NHLBI K12 Implementation Science (Houston/Lemon)

Continuing:

IMSD – Pre-doctoral diversity grant (Lewis / Lapane)

MSTP – MD/PhD (Szabo)

R25 – (Lemon/Houston)

T32 – (Kiefe/Keaney)

TL1 – (Lapane / Corvera)

KL2 – (Keaney / Allison)

K – Individual mentored award

KL2, K12, R25 – Institutional post-doc

TL1, T32 – Institutional post-doc (MD or PHD)

F30, F31, R36 – Individual training grant (PhD or MD/PhD)

TL1, T32 – institutional pre-docs (PhD,MD/PhD), MSTP (MD/PhD)

IMSD Pre-doctoral Awards

PREP/Pathways Program (Before entry to Graduate School)

Funded Student Grants



Apurv Soni – MD/PhD candidate:

NICHD F30

Understanding Trends, Predictors, and Consequences of Child Undernutrition in India Using Geospatial and Multilevel Models

Mentor: Allison

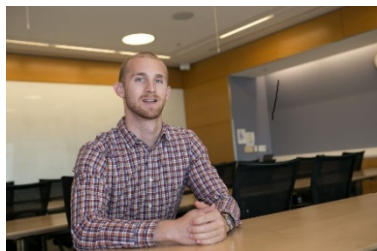


Meera Sreedhara, MPH, PhD Candidate (NEW!)

NHLBI F31

Local health departments and inclusion of evidence-based healthy eating and physical activity policies in their community health improvement plans

Mentor: Lemon



Matthew Alcusky, PharmD, MS, PhD Candidate (NEW!)

NIA R21

Anticoagulant Use, Safety, And Effectiveness For Ischemic Stroke Prevention In Nursing Home Residents With Atrial Fibrillation

Mentor: Lapane

GOOD LUCK to Grants Under Review!



Ganga Bey, MPH, PhD Candidate
Gendered Race, Perceived Discrimination,
and Cardiovascular Disease Disparities:
Application of Intersectionality Theory

NHLBI F31
Mentor: Person/Kiefe

Deb Mack, MPH, PhD Candidate
Use and safety of statins among nursing home
residents with life-limiting illness in the United States

AHRQ R36 Dissertation Grant
Mentor: Lapane



Geographic Variation in the Initiation of Commonly Used Opioids and Dosage Strength in United States Nursing Homes

Jacob N. Hunnicutt, MPH,* Jonggyu Baek, PhD,* Matthew Alcusky, PharmD,*
Anne L. Hume, PharmD,†‡ Shao-Hsien Liu, PhD,* Christine M. Ulbricht, PhD,*
Jennifer Tjia, MD, MSCE,* and Kate L. Lapane, PhD*

Objectives: To examine and quantify geographic variation in the initiation of commonly used opioids and prescribed dosage strength among older US nursing home residents.

Methods: We merged 2011 Minimum Data Set 3.0 to Medicare claims and facility characteristics data to conduct a cross-sectional study among long-stay nursing home residents who initiated short-acting opioids commonly used in nursing homes (oxycodone, hydrocodone, or tramadol). We examined geographic variation in specific opioids initiated and potentially inappropriate doses (≥ 50 mg oral morphine equivalent/d) across hospital referral regions (HRR). Multilevel logistic models quantified the proportional change in between-HRR variation and associations between commonly initiated opioids and inappropriate doses after adjusting for resident characteristics, facility characteristics, and state.

Results: Oxycodone (9.4%) was initiated less frequently than hydrocodone (56.2%) or tramadol (34.5%) but varied dramatically between HRRs (range, 0%–74.5%). In total, resident/facility characteristics and

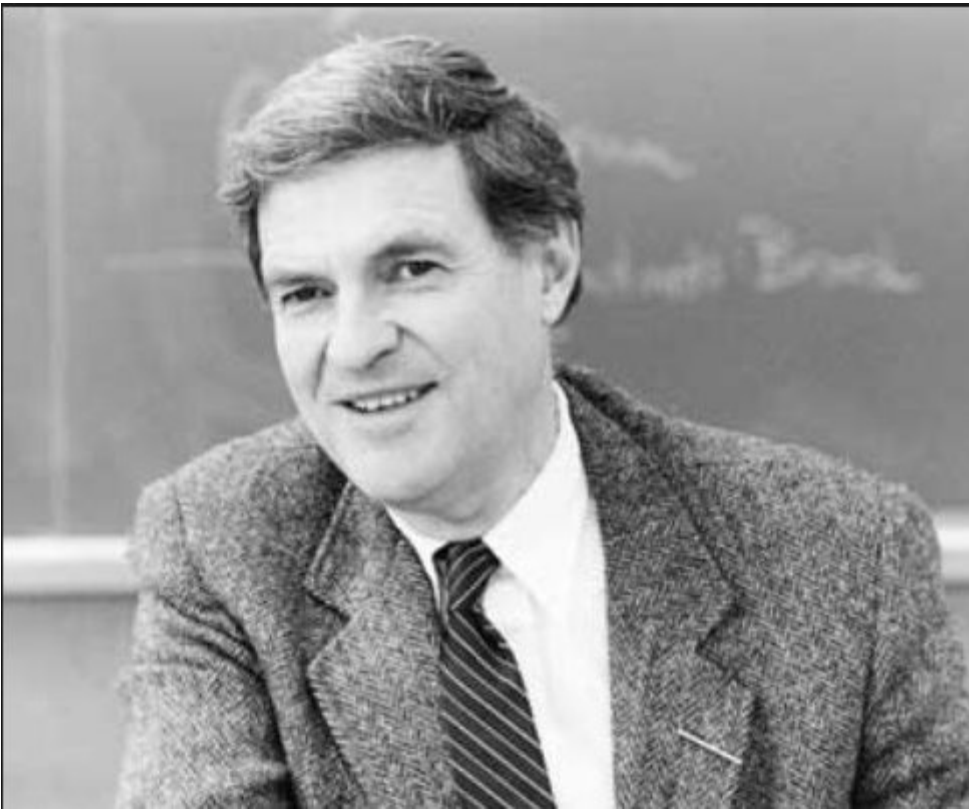
less likely (adjusted odds ratio, 0.28; 95% confidence interval, 0.25–0.31) to be prescribed potentially inappropriately high doses.

Conclusions: We documented extensive geographic variation in the opioid and dose initiated for nursing home residents, with state explaining the largest proportion of the observed variation. Further work is needed to understand potential drivers of opioid prescribing patterns at the state level.

Key Words: opioids, opioid initiation, nursing homes, geographic variation

(*Med Care* 2018;00: 000–000)

During the last 2 decades, prescription opioid use in the United States—along with opioid misuse, abuse, and overdose—dramatically increased in younger and older adults.^{1–3} The nationwide opioid crisis may be of particular importance in nursing homes, where pain has traditionally been undertreated and long-



Learning should not only take us somewhere; it should allow us later to go further more easily.

Ted Sizer

STUDENT PRESENTATION

Meera Sreedhara, MPH

Clinical and Population Health Research PhD Program, GSBS

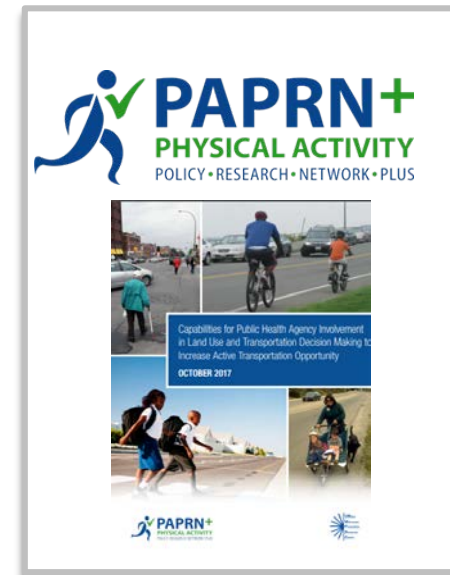
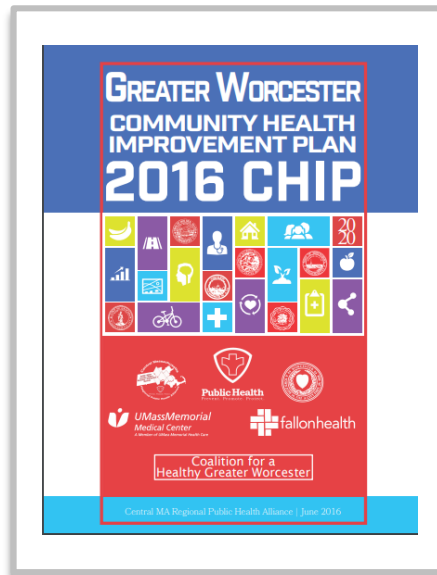
Division of Preventive and Behavioral Medicine

Quantitative Health Sciences

Background & Research Interests

- Clinical and Population Health Research Doctoral Student
- Advisors from the Division of Preventive and Behavioral Medicine
- Mixed-methods research skills
- Environmental and policy based public health approaches to promote healthy eating and physical activity

PBM Training & Research Assistantship



Dissertation

Mixed-methods study of healthy eating and physical activity approaches that are included in Community Health Improvement Plans (CHIPs)

- **Aim 1**
 - To establish the proportion of CHIPs that included policy and environmental strategies supportive of healthy eating (32.3%) and active transportation (46.5%)
 - To determine characteristics associated with inclusion of these strategies in a CHIP. LHDs' accreditation status and use of credible resources (such as the Community Guide) were identified.
- **Aim 2** – To evaluate the quality of healthy eating and physical activity policy strategies included in CHIPs
- **Aim 3** - To conduct a qualitative assessment of the implementation of evidence-based healthy eating & physical activity policies included in CHIPs.
- Funding – TL1 & NHLBI F31

Who are they? Where?



On the Horizon for FY 19

- New
 - Chair
 - Division Chief of Epidemiology
 - Growth guided by strategic planning
- Improved communications and collaborations
 - Within QHS
 - With others

Summary

- We have been remarkably successful since our inception in 2009 in:
 - Our own research
 - Scientific service
 - Empowering and developing the next generation
- Our institution (UMMS) believes in us and wishes to see us grow
- Together, we will realize our enormous potential

THANK YOU

Thursday, November 8 at 12:00



QUESTIONS?
