FRIN is very fortunate to have Joel Dickerman, DO as its Research Director. Dr. Dickerman brings a wealth of experience and interest to the FRIN concerning research around practice transformation through uptake of knowledge by clinicians. In addition to being the FRIN Research Director, Dr. Dickerman is currently the Chief Medical Officer for Community Care, an Accountable Care Organization (ACO) servicing a five (5) county region in Colorado. Additionally, Dr. Dickerman is a Family Physician and Educator with a Certificate of Added Qualifications in Geriatrics. Dr. Dickerman completed a two-year fellowship in Primary Care Research sponsored by the Virginia Commonwealth University Grant-Generating program. Dr. Dickerman brings a wealth of insight on putting research to work in the value-based purchasing context created by the Affordable Care Act. With his leadership, FRIN hopes to conduct research to help prepare for the health care system and payment models of the future.

The Frontier Rural Innovations Network has joined forces with three other PBRNs with an emphasis of rural and health disparities research: the Kentucky Ambulatory Network, the West Virginia Research Network, and the NorTex PBRN to form a “Super Practice-Based Research Network”! The Fab 4 collaborative spans over 6 states that are primarily rural. The intent of this newly formed collaboration is to formulate and share ideas and resources, work together on innovative PBRN projects, and eventually apply for large research grants using our large multi-site, multi-state network. The Fab 4 meets via conference call every other month to discuss current research activities and other projects of each individual PBRN, and look for opportunities to collaborate. Collaborative ideas on the horizon include: a registry project, conducting a Patient-Centered Medical Home crosswalk to determine sustainable and worthwhile pilot projects, and development of a Transitional Care Management tool.

This team is committed to focus on research that is important to the practice members and the communities they serve. If you are interested in joining bi-monthly teleconference calls, contact David C. Dixon at daviddixon@a-optic.org.
Research Interests

It is the goal of FRIN to bring value to its Members through the conduct of meaningful research that matters to them, their patients, and communities. To align FRIN efforts with these stakeholders, FRIN has gathered information on Member research interests at sign up using the Care Setting Enrollment Form and Research Member Enrollment Form. The results are depicted in the pie chart beside:

Not surprisingly given the frontier and rural makeup of FRIN populations, Access to Care and Utilization, Diabetes, and Obesity topped the list of research interests, with Smoking Cessation and Alcohol Abuse also of considerable concern.

Population Health Management Web-Based Modules COMING

A-OPTIC (in collaboration with Owensboro Health and KAN) has developed the first three (of eight) modules on Population Health Management. The first three modules provide: an Overview of Population Health Management, Identifying the Impact of Population Health Management, and Cultivating a Culture of Change and Patient Engagement. This series of modules provides a basic knowledge about caring for populations and patients (not only individuals) necessary for the changing models of care and the way we deliver care. The purpose of these modules is to introduce the concepts and applications of Population Health Management and Quality Improvement. The population health management framework can be embedded into a primary care integrated system in a variety of ways. The processes and key components discussed in these modules can be applied to health care organizations and clinics to assess capabilities and to guide the development of expanded and integrated care delivery models.

Population Health Management Modules can be found at: http://www.cecentral.com/node/1224. A-OPTIC members can receive free CME by contacting us at daviddixon@a-optic.org.

Visit frontier-rural.org for more
What is a Community Advisory Board?

The role of the FRIN Community Advisory Board (CAB) is to ensure that the research it conducts is meaningful and implemented appropriately so that there is a higher likelihood that it will be used by the intended consumers. Where Institutional Review Boards ensure safety of human subjects and peer-review ensures study soundness, CABs ensure that the research is relevant and important. For further reading on CABs, follow this link: [Click here](#).

Members are from top to bottom: Faith Jones, MSN, RN, NEA-BC, David Smith, Ph D, Boyd Buser, DO, Joel Dickerman, DO, Dana Shaffer, DO, Gary Woodson, RPH, Drug Information Specialist, and Jarvis Green.

Preparing Medical Students for the Health Care of the Future – Research Skills and Social Media

Delivering a high-quality education in research skills to medical students on clinical rotations in rural community-based settings is a persistent challenge. The value-based purchasing context created by the Affordable Care Act has made the ability of physicians to implement and evaluate interventions and be conscientious consumers of medical literature even more important.

The Frontier Rural Innovations Network is part of a team that received funding to evaluate the use of Facebook to “push” research curriculum resources to students on rotations and engage them as members of study teams. It is known that most current medical students are well versed in the use of social media. The goal of the research is to evaluate if social media will prove to be a cost-effective and readily available “mentor” to promote medical student research education and engagement.

Research Education & Facebook partners:
OPTI-West
Rocky Mountain OPTI
Rates of opioid and benzodiazepines prescription and overdose are disproportionately high in Appalachia. The targeted regions of West Virginia and Kentucky are both among the 5 leading states for painkiller prescriptions. West Virginia has the highest number of drug overdose deaths, at 28.9 per every 100,000 people, and Kentucky suffers from a similarly high rate. The Frontier Rural Innovations Network is part of a team of organizations, agencies, and associations that has received funding to create the Central Appalachia Inter-Professional Pain Education Collaborative (CAIPEC) to address this health issue.

CAIPEC’s overarching goal is to improve the delivery of chronic pain management to residents of Central Appalachia through an evidence-based and inter-professional approach. The program intends to improve patient outcomes by advancing knowledge on team-based care and processes and the appropriate management of chronic pain through pharmacologic and non-pharmacologic modalities.

CAIPEC will utilize evidence-based chronic pain management guidelines as the basis to deliver education through an inter-professional and interdisciplinary approach. CAIPEC activities, including community roundtable discussions, case-based webcast, and state conference presentations, will target varying professions and disciplines that care for Central Appalachians with chronic pain. These include physicians, advanced practice providers (APP), massage and behavioral therapists (MT and BT), and physical therapists (PT). The content of educational activities will have cross-cutting themes in epidemiology and pathophysiology of chronic pain, assessment and shared-decision making approaches, treatment options that include inter-professional and interdisciplinary approaches, and practice enhancement in managing chronic pain patient populations. Practice enhancement tools will be made available by offering a chronic pain toolkit that will provide adaptable clinic workflows, pain assessment and risk tools, template for offices, and customizable controlled medication agreements, for example.