



Community and Practice Research (CPR) Program NEWSLETTER

www.octri.org/cpr

OCTRI Mission

Improve human health by enhancing clinical and translational research.

CPR Objective

Extend clinical and public health research beyond the walls of academia into the community and community-based practices.



Message from the Director

Richard A. Deyo, MD, MPH

We've focused this newsletter on the Oregon Rural Practice Research Network (ORPRN), one of the key components of our Community and Practice Research program. ORPRN is a successful research network of rural practices in Oregon, and is registered with the Agency for Healthcare Research and Quality (AHRQ) as one of its contract research networks. LJ Fagnan, in the OHSU Department of Family Medicine, is Director of the Network, and brings to the job his years of experience in small town private practice.

One of the remarkable things about ORPRN is its success in blending Community-Based Participatory Research with practice-based research. The dental needs study described in this issue illustrates how the community can help to set the research agenda within a program like ORPRN. For more information on ORPRN and how to propose projects in the network, go to www.ohsu.edu/orprn.

ORPRN is just one of several PBRNs working

with our Community and Practice Research program; the others include OCHIN (Federally Qualified Health Centers linked by a common EMR); and 3 dental research networks based at OHSU or Kaiser. Furthermore, through OCTRI's collaboration with Kaiser, we have access to the HMO Research Network (HMORN), a large national research network with an enormous patient base. These networks can facilitate a wide range of research projects that benefit from having multiple practices and practice sites.

We've also included a brief summary of our Community and Practice Research retreat, held at OHSU on September 5th. Many institutions and agencies were represented, new collaborative opportunities were discussed, and many instances of shared interest were discovered. We hope that the meeting will result in some new collaborations and projects, and hope you'll tell us about any new efforts that arise from the meeting.

-Rick

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OREGON RURAL PRACTICE-BASED RESEARCH NETWORK



ORPRN is a statewide network of rural primary care clinicians and their practices dedicated to improving the health of rural Oregonians through community and practice-based clinical research. ORPRN currently has 47 member practices serving 36 communities throughout Oregon, with 152 clinician members serving approximately 230,000 patients.

ORPRN investigators and staff are available to assist researchers with:

- Study design
- Recruitment
- Grant writing & editing
- Budget, grant & contracts
- IRB
- Project coordination
- Data collection
- Data entry & management
- Data analysis & statistics
- Literature reviews
- Manuscript assistance

Look inside for more about ORPRN....
www.ohsu.edu/orprn



Oregon Rural Practice-Based Research Network

The mission of ORPRN is to improve the health of rural populations in Oregon through conducting and promoting health research in partnerships with the communities and practitioners we serve.



Lyle "LJ" Fagnan, MD
Director, ORPRN

Conducting research with ORPRN...

Comments from Linda Boise, PhD. MPH. OHSU Principal Investigator for the "Rural Oregon Adult Memory" Study (ROAM). (See ORPRN Research Studies, page 5.)

Design: "Practice-based research requires the melding together of a sound research design with a protocol that will work for primary care clinicians in their everyday practice. The ORPRN team spent a number of months designing an implementation plan to ensure that we would have credible results within the framework of ORPRN practice."

Recruitment: "LJ was...essential ...to help me get connected with practicing clinicians in ORPRN clinics. He recognized the need for addressing healthcare concerns of older adults. Dementia and memory loss is huge for older people and a challenge for clinicians. He really was a champion for my project and encouraged clinicians to consider participating in the ROAM study."

Budget: "Anne King was amazing in her supportive and efficient help in preparing the budget, dealing with grants accounting and research protocols. She prepared and implemented all contracts needed in the grant."

IRB: "Prior to my project, ORPRN had worked with the Human Subjects Review office to develop understanding of the unique aspects of conducting research in primary care practices. This was a tremendous help when my project was funded providing for a smooth and timely approval process from IRB."

Data: "My project could not have been carried out without the support and assistance of Monica Goubaud, ORPRN's regional research coordinator on the coast. Monica has a strong relationship with the clinics' staff and clinicians and maintained an ongoing line of communication that was needed to implement the project. This involved everything from scheduling focus groups at the clinics, working the digital recorder during the focus groups, answering clinicians and clinic staff questions about the project, reviewing patient charts, and visiting each clinic to make sure the protocol was being implemented according to plan. ORPRN arranged for and completed all data entry in an efficient and timely fashion."

Analysis and statistics: "Cindy Morris and Nora Mattek provided assistance with data analysis and interpretation."

Manuscripts: "The ORPRN team has worked with me to edit the ROAM manuscript to JGIM [Journal of General Internal Medicine], offering helpful advice on presentation of study results to primary care readership."

Examples of ORPRN Research with Community Partners

Unmet Dental Needs in Baker County

Since 2005, when the Baker County Community Health Improvement Partnership (CHIP - see "CHIP to CHIRP" on next page) identified dental access barriers as a priority community health concern, local community leaders have been exploring ways to address their town's unmet dental needs. In 2007 medical, dental, and public health leaders approached two OHSU Practice Based Research Networks - the Oregon Rural Practice-based Research Network (ORPRN) and the Practice-based Research in Oral Health (PROH) Network - to collaboratively address the community's oral health challenges. Melinda Davis, ORPRN's Eastern Oregon Practice Enhancement Research Coordinator (see below), played a key role in moving the collaborative beyond the planning stages and into action in the local practices and community.

After a series of onsite and teleconference meetings the Baker County Oral Health Collaborative identified three stages for the research partnership:

- To quantify the severity of oral health problems and unmet dental needs in the community;
- To share findings with other community partners and identify feasible and sustainable solutions;
- To target funding sources, implement short and long term solutions, and to evaluate their "success".

To address the Stage 1 goal, the collaborative assessed the prevalence of unmet dental needs in Baker County as they present in primary care. Eight primary care providers from Eastern Oregon Medical Associates (EOMA) conducted basic oral health assessments for six weeks on patients over 1 year in age. Patients were asked to complete a brief Dental Access Survey. Of the 1,647 patients presenting to EOMA, 40.9% received oral health

screens and 46.0% of those had significant conditions. Seventy-one percent of the patients completed the dental access survey in which 27.6% reported experiencing unmet dental needs (324/1,170).

PROH, ORPRN and the local Collaborative stakeholders met in early 2008 to share Stage 1 findings and identify Stage 2 activities. Upon concluding that there are substantial unmet dental needs in Baker City, the stakeholders decided to engage additional community partners in planning the next steps. In June 2008 ORPRN's Paul McGinnis facilitated a community meeting to discuss the findings and identify short and long term sustainable

solutions for addressing the community's oral health disparities. Representatives from St. Elizabeth's Hospital and ODS School of Dental Hygiene in La Grande joined the partnership at this community meeting. Stakeholders also began corresponding with the Crook County CHIP, another Oregon partnership working to address their community's dental needs.

The Baker County collaborative is currently exploring next steps and funding sources (Stage 3). Melinda Davis is coordinating a meeting with stakeholders and with Mike Plunkett of the OHSU School of Community Dentistry. This meeting is scheduled to take place in late October, 2008.



What's missing in Baker City, Oregon?

Please Join Us for a Dialogue to Address Unmet Dental Needs in our Community

Wednesday June 25, 2008

5:30-7:00pm

Eastern Oregon Medical Associates Lobby
(3950 17th St., Suite A)



Monica Goubaud, MA
Oregon Coast PERC

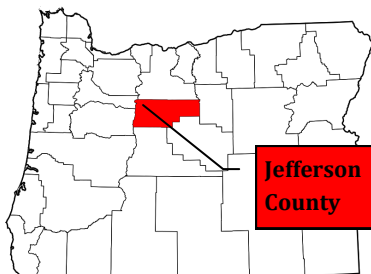


Melinda Davis, MA
Eastern Oregon PERC

Facilitating Community –Engaged Collaborative Research in Rural Oregon

The Practice Enhancement Research Coordinators (PERCs) from Oregon Rural Practice-based Research Network (ORPRN) are key to successful partnering among ORPRN practices, academic researchers, and community organizations. As residents of rural communities (Newport and La Grande), they have first-hand knowledge about rural healthcare issues and barriers. The relationships they build with ORPRN practices and community organizations lay the foundation for collaborations with research investigators.

Mountain View Community-Based Participatory Research Partnership



When it comes to community health development work, some say the “process is the product” while others argue that the “proof is in the pudding; not the ingredients or the recipe.” The people of Mountain View Community-based Participatory Research Partnership (MV-CBPRP) in Oregon’s Jefferson County are hoping both hold true. During the past year they have worked on building research knowledge and skills in partnership with the Oregon Practice-based Research Network (ORPRN), and have submitted an R21 to NIH and a policy driven research proposal to the Northwest Health Foundation.

The MV-CBPRP has its roots in the Mountain View Community Health Improvement Partnership (see “From CHIP to CHIRP” in box below), a collaborative effort between the Mountain View Hospital and the Oregon Office of Rural Health (ORH) housed at OHSU. MV-CBPRP is a coalition of organizations dedicated to improving the health status of the County’s children through educational programs, intervention projects, community based research and development of community policy.

ORPRN partnered with the MV-CBPRP to develop training that prepared community members to be effective partners with research investigators. The training curriculum included defining research, human subject protection, integrity, and basic research methods.

The five month training process led to two research proposals. The first was submitted to NIH in May of 2008. The goal of this study is to partner with the community to evaluate the effectiveness of MEAL - Mindful Eating Active Living - a developmentally linked, family-centered intervention called designed to reduce risk for overweight and obesity in children ages 4-6. MEAL is a multi-family group intervention based on two existing interventions, Am I Hungry? ®, a non-restrictive approach to weight management and Parent Child Interaction Therapy (PCIT), a highly successful, evidence-based parenting intervention designed to increase positive interactions between parents and their children.

The second proposal, “Policy Approaches to Children’s Health” (PATCH), tests the effectiveness of three school-based policies: 1) labeling foods with caloric values at the point of purchase to influence food choices of middle school students, 2) scheduling recess before eating lunch, the reverse of the current system, to improve nutrient consumption and changes classroom behaviors among elementary age students, and 3) informing versus not informing parents of the body mass index (BMI) percentile values of their children through written notification.

From CHIP to CHIRP...



Paul McGinnis, MPA
Community Health, Quality and Practice Development Director
ORPRN

The Community Health Improvement Partnership (CHIP) is a structured comprehensive community health development process created in 1995 by Paul McGinnis, the Community Health, Quality and Practice Development Director at ORPRN. CHIP is designed to involve community members in developing ways to improve the local health care delivery system and community health status. In 2007 a “Research” focus was added to the CHIP program, laying the foundation for CHIP becoming a “CHIRP” – Community Health Improvement “Research” Partnership. The development of a community research training curriculum by the Mountain View Community-Based Participatory Research Partnership of Jefferson County (see above) is an example of how CHIP is evolving with this added research component.

CLINICAL & PRACTICE CHANGE RESEARCH

ASSESSING THE CLINICAL AND BUSINESS CASE FOR NURSE-BASED CARE MANAGEMENT

PIs: Lyle Fagnan, MD and David Dorr, MD

Funding Agency: Agency for Healthcare Research and Quality

Settings: Scappoose, Baker City, The Dalles, Klamath Falls, Coos Bay, Ontario

Topic: Analysis of clinical and economic outcomes of introducing nurse training and health IT to manage patients with chronic conditions.

IMPROVING MANAGEMENT OF COMPLEX CARE WITH INTEGRATED CARE COORDINATION INFORMATION SYSTEM (ICIS)

PI: David Dorr, MD

Funding Agency: Agency for Healthcare Research & Quality

Settings: Scappoose, Baker City, Klamath Falls, Lincoln City

Topic: Training for nurse care managers and use of care management tracking software to help clinics better care for patients with chronic conditions. The model helps the clinical team prioritize needs and prevent complications, and provides tools to assist patients to self-manage.

CLINIC LEVEL IMPROVEMENT IN PREVENTIVE SERVICES (CLIPS)

PI: David Buckley, MD

Funding Agency: National Institute on Disability and Rehabilitation Research

Settings: Scappoose, Enterprise

Topic: A quality improvement study to assess a clinic intervention designed to improve the receipt of routine preventive services for adults with mobility impairments in the primary care setting.

COLONOSCOPY IN RURAL OREGON PRACTICES (CROP)

PI: David Lieberman, MD

Funding Agency: National Cancer Institute

Settings: Statewide

Topic: Implementing a nationwide colonoscopy database.

PHARM FREE

PIs: David Evnas, MD and Daniel Hartung, PharmD, MPH

Funding Agency: AAFP Foundation

Settings: Madras

Topic: Assesses the impact on prescribing patterns and clinical environments of limiting pharmaceutical representative access in primary care.

MANAGEMENT OF CHRONIC KIDNEY DISEASE IN PRIMARY CARE PRACTICES IN RURAL OREGON

PI: Maya Rao, MD

Funding Agency: AAFP Foundation

Settings: Statewide

Topic: Whether identifying and diagnosing kidney disease is affected by distance to specialty care.

OREGON WOMEN'S STUDY

PI: Kent Thornburg, MD

Funding Agency: Northwest Health Foundation, Collins Foundation, Private Donors

Settings: Klamath Falls

Topic: Effects of maternal nutrition on fetal health and later adult disease.

UNDERSTANDING UNMET DENTAL NEEDS IN A RURAL OREGON COMMUNITY

PI: Tom Hilton, MD

Setting: Baker City

Topic: Screening to identify unmet dental needs in a single rural clinic.

RURAL OREGON ADULT MEMORY STUDY (ROAM)

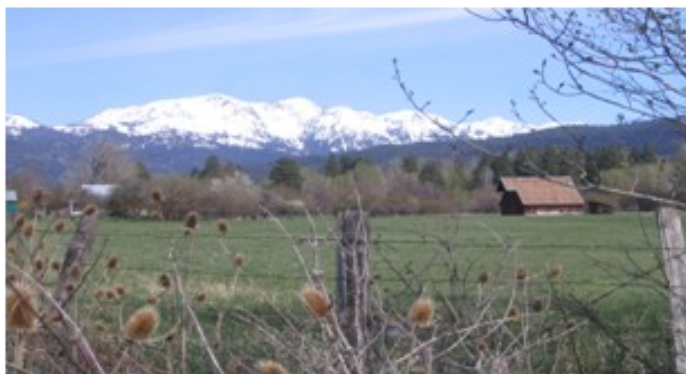
PI: Linda Boise, PhD

Funding Agency: Agency for Healthcare Research & Quality

Settings: Wheeler, Astoria, Scappoose, Pacific City, Newport, Florence, Reedsport

Topic: Testing a dementia screening and evaluation model.



RURAL OREGON IMMUNIZATION INITIATIVE (ROI)**PI:** Lyle Fagnan, MD**Funding Agencies:** Centers for Disease Control & Prevention, Oregon Department of Health & Human Services, American Academy of Family Physicians Foundation**Settings:** Baker City, Hermiston, John Day, Pacific City, Astoria, Grants Pass, Scappoose, Enterprise, Burns, John Day**Topic:** Screening practices, attitudes and quality improvement opportunities for rural immunization delivery.**STRENGTHENING OREGON COMMUNITY SERVICES (SOCS)****PI:** Brian Rogers, MD**Funding Agency:** National Institute for Child Health & Human Development**Settings:** Statewide**Topic:** Enhancing community systems of care for children with chronic conditions including physical, cognitive, and mental health impairments.**CONFIDENCE AND COMPENSATION OF ORPRN PHYSICIANS COVERING THE EMERGENCY DEPARTMENT****PI:** Lyle Fagnan, MD**Setting:** Statewide**Topic:** Survey of ORPRN clinicians' confidence and compensation for covering emergency department.**PATIENT SAFETY RESEARCH****SAFETY CULTURE OF AMBULATORY CARE: MEDICAL OFFICE SURVEY ON PATIENT SAFETY (SOPS)****PI:** Lyle J. Fagnan, MD**Funding Agency:** Agency for Healthcare Research & Quality**Settings:** 300 practices in the US, including 25 in Oregon**Topic:** Survey of clinicians and administrative staff to capture a comprehensive snapshot of safety culture to bring visibility to the issues of patient safety in the ambulatory environment and contribute to the national benchmarking database.**MEDICATION ERRORS AND ADVERSE DRUG EVENTS IN PRIMARY CARE (MEADERS)****PI:** Lyle J. Fagnan, MD**Funding Agency:** Agency for Healthcare Research & Quality**Settings:** John Day, Enterprise, Baker City, Scappoose, The Dalles**Topic:** Electronic reporting system for medication errors and adverse drug events.**RxSAFE – SHARED MEDICATION MANAGEMENT AND CLINICAL DECISION SUPPORT****PI:** Paul Gorman, MD**Funding Agency:** Agency for Healthcare Research & Quality**Settings:** Lincoln County**Topic:** Expanding the RxSAFE technology to incorporate clinical decision making.**RxSAFE – USING INFORMATION TECHNOLOGY TO IMPROVE MEDICATION SAFETY FOR RURAL ELDERS****PIs:** Paul Gorman, MD and Karl Ordelheide, MD**Funding Agency:** Agency for Healthcare Research & Quality**Settings:** Lincoln County**Topic:** Establishing a master medication information system across a community to reduce medication errors for elderly patients.**DESCRIPTIVE RESEARCH****CHRONIC OPIOID THERAPY AND PREVENTIVE SERVICES****PIs:** James Calvert, MD and David Buckley, MD**Funding Agency:** American Academy of Family Physicians Foundation**Settings:** Klamath Falls, John Day, Wheeler, Elgin, Union, Lincoln**Topic:** Investigating potential associations between chronic opioid therapy for non-malignant pain in the primary care setting and performance of preventive health services.**ORPRN MEMBER SURVEY****PI:** Lyle Fagnan, MD**Settings:** Statewide**Topic:** Characteristics of practices and clinicians in ORPRN member clinics.

OCTRI Community & Practice Research (CPR) Program Retreat Summary

On September 5th, 2008 the OCTRI Community & Practice Research (CPR) program held a retreat focused on practice and population-oriented translational research (T2/T3 research) and attended by many local researchers. Please see below for a brief summary.

Key Points

- 54 individuals participated, from: Asian Health & Service Center, CareOregon, KP Center for Health Research, KP Dental Associates, Multnomah County Health Dept., OCHIN, OHSU, Oregon Dept. of Human Services, Portland VAMC, Providence Health System, PSU, Samaritan Health System, Virginia Garcia Memorial Health Center
- Tips on making research relevant to public policy (from Rep. Mitch Greenlick)
 - Start developing the answer years before being asked the question
 - Remember the difference between being an advocate and a policy expert
 - Remember the difference between a point estimate and a confidence interval
 - Don't show off
- For research in the Kaiser Permanente System:
 - Involve Kaiser early in the proposal development process
 - In general, should anticipate having a KPCHR co-investigator on any study; this allows Kaiser to ensure compliance with all organization-specific regulations
 - Need to work toward research coordinators that are trained in both the Kaiser and OHSU systems.
 - Contact: *OCTRI Kaiser Front Door @ 503-528-3934 or Front.Door@kpchr.org*
- All organizations represented on the Public Policy panel are open to research collaboration and would welcome being approached.
 - CareOregon: *David Labby* (labbyd@careoregon.org)
 - Oregon Department of Human Services Medical Assistance Programs: *Charles Gallia* (Charles.a.Gallia@state.or.us)
 - Oregon Health Research and Evaluation Collaborative (OHREC): *Jen DeVoe* (devoej@ohsu.edu) and *Matt Carlson* (carlsonm@pdx.edu)
 - Program Design and Evaluation Services, Multnomah County Health Dept. & OR Public Health: *Julie Maher* (julie.e.maher@state.or.us) and *Myde Boles* (Myde.Boles@state.or.us)
- In Community-Engaged Research:
 - The research relationship should be based on reliability, transparency and inclusiveness at all stages of the research process
 - trust and relationship should not be built solely in response to an RFA, but should be ongoing and benefit both parties
- Practice-based Research Networks:
 - Welcome interventions that will improve care in their systems (behavioral, IT, ...)
 - Clinicians would like to be involved in vetting research projects
 - Developing the relationship early allows better collaboration
 - OCHIN is a unique source of electronic data for a large underinsured population
- *Patty Carney* (carneyp@ohsu.edu) emphasized that the OHSU Cancer Institute encourages, and is currently engaged in, population and community-engaged research.
- *Cindy Morris* (morrisc@ohsu.edu) shared information on a recently awarded T32 grant for health services research, which will have 2 pre-doc and 4 post-doc slots.

NEWS | EVENTS | HONORS

Notice: OCTRI Pilot Project Funding

Letter of intent due: November 1, 2008

Full application due: February 1, 2009.

The purpose of funding is to support OHSU and KPCHR investigators in the generation of preliminary data that will launch new NIH 'R' or career development proposals.

T2/T3 researchers are encouraged to apply. Please see [Funding Opportunities](#) for more details.

Coming soon: Child health RFA

Co-sponsored by OCTRI and the Department of Pediatrics, this RFA is expected to be released the week of October 13th. Deadlines are one month later than the above OCTRI Pilot Projects. Investigators may apply for both.

News

- **Cindy Morris** awarded a T32 grant for health services research with 2 pre-doc and 4 post-doc slots. **Rick Deyo** is a co-investigator.
- **Somnath Saha** of Portland VA, in consultation with **Cindy Morris** and **Rick Deyo**, developed and will teach a new OHSU course on CBPR in the next academic year.
- A collaboration between KPCHR, OHSU, OCHIN and the Multnomah County Health Dept., partially supported by OCTRI, has resulted in an accepted manuscript: *Gold, Rachel; DeVoe, Jennifer; Shah, Amit; Chauvie, Susan. 2008. Insurance continuity and receipt of diabetes preventive care in a network of Federally Qualified Health Centers. Medical Care. In press*
- **Patty Carney** and Heidi Nelson of the EPC are OHSU co-investigators on a breast cancer multi-site R01 submission resulting from the May Translational Cancer Conference sponsored by OCTRI and the OHSU Cancer Institute (Joann Elmore, PI).
- **LJ Fagnan** provided consultation to UCSF CTSA on Community Collaboration Guidelines and on PBRN integration into CTSA's.
- **Paul McGinnis** presented 5 training sessions on research methods and compliance for CBPR group in Madras, OR and provided consultation on NWHF grant.
- **ORPRN** awarded AHRQ contract to implement patient safety survey across 11 practice-based research networks nationwide.
- **NutritionWorlds** exhibit now ready for use at area health fairs.
- **Mark Spofford**, along with Linda Boise (PI, PSU), David Feeny (KPCHR) and Noelle Wiggins (MCHD) submitted a Peers for Progress/AAFP Foundation proposal "Popular Education Peer Support Program for Latinos with Diabetes" (submitted Aug 2008).
- **Rick Deyo** is PI of new NIAMS-funded R01 titled "Complications of Surgery for Spinal Stenosis."
- **Paul McGinnis** was honored for his 25 years of rural community health improvement planning at the 25th annual Oregon Rural Health Conference.

Selected Publications by CPR Members

- **Mosen DM**, Schatz M, Magid D, Carmargo C. The relationship between Obesity and Asthma Severity and Control in Adults. *J Allergy Clin Immunol.* (in press)
- **Mosen DM**, Remmers CL, Dirks EM, Bellows J, **Mularksi R**. Association of care coordination with outcome measures for adults with diabetes (abstract). *Academy Health* 2008.
- **Mularksi RA**. Translating and implementing evidence-based care in the ICU – It's time to VALUE family communication. *Chest.* (in press).

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Selected Publications by CPR Members, cont'd

- **Whitlock EP**, Lin J, Chou R, Shekelle P, Robinson K. Using systematic reviews in complex systematic reviews. *Annals of Internal Medicine* 2008; 148 (10):776-82.
- Op-ed in Seattle Times by **Rick Deyo** titled "Don't be too eager to try the latest medical gadgets."
- **Carney PA, Bunce A**, Perrin N, Howarth LC, Beemsterboer P, Griest S, Cameron WE. Educating the Public About Research Funded by the National Institutes of Health Using a Partnership Between an Academic Medical Center and Community-based Science Museum. *Journal of Community Health* (In Press).
- **Shannon J**, King IB, Lampe JW, Gao DL, Ray RM, Lin M-G, Stalsberg H, Thomas DB. Erythrocyte fatty acids and risk of proliferative and non-proliferative fibrocystic disease in women in Shanghai, China. *Am J Clin Nutr.* 08/2008; in press.

Selected Presentations by CPR Members

- **Rick Deyo** gave the Hilda and Bill Birnbaum endowed lecture to an audience of 400 in Seattle, on the topic of "Hope or Hype: the conflict between profits and science in health care."
- **Jackie Shannon** and colleagues presented on "Erythrocyte Fatty Acids and Fatty Acid Synthase Expression in Benign and Malignant Prostate Tissue at the AACR Centennial Conference Translational Cancer Medicine 2008.
- **Arwen Bunce** and Lisa Marriott led a session on "Data Collection and Sampling" at the SEPA Annual Teacher Institute for the Experience of Science (TIES).
- **Rick Deyo** interviewed by the NY Times on ethics of and conflicts of interest in medical device evaluations.
- **Evelyn Whitlock** spoke on "Topic Selection for the AHRQ Effective Health Care Program" at the AHRQ US Preventive Services Task Force Meeting and on "Challenges in systematic reviews: Can using existing reviews save time? Be valid?" at the US Cochrane Center Conference.
- **Rich Mularksi** presented on "Ethical possibilities in inappropriate requests for aggressive therapy" to the NW Permanente Regional Ethics Committee.
- **Rick Deyo** gave Grand Rounds presentation on Evidence-based Medicine at Bay Regional Hospital in Coos Bay, OR.
- **ORPRN** led 7 talks and workshops at the annual AHRQ PBRN Research Conference, including a plenary by **LJ Fagnan** titled "Development and Pilot Testing of Medication Error and Adverse Drug Event Reporting System (MEADERS)."
- **LJ Fagnan**, ORPRN staff and partner-investigators gave several presentations at the 25th annual Oregon Rural Health conference in Bend, OR. Presentations included: ORPRN as a rural health resource (LJ Fagnan); lessons learned in Oregon rural health and planning for the future (Paul McGinnis); "Unmet Dental Needs in Rural Oregon" (Tom Hilton, PI; Melinda Davis, PERC); "Team Care in the Medical Home: Care Management Plus Model" (David Dorr, PI); and "Chronic Opioid Therapy and Preventive Services in Rural Primary Care Practice" (David Buckley, PI).

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