

RESEARCH INSTITUTE

"In a laboratory on this site in the period 1961-1963 Dr. E. Donnal 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 in Medicine to Dr. Thomas in 1990."



THE BASSETT RESEARCH INSTITUTE (BRI)

2016 YEAR IN REVIEW

What we do... "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.”

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A NOTE FROM OUR DIRECTOR



Having been a part-time senior research scientist at the Bassett Research Institute (BRI) for 22 years, I thought I knew what the BRI was all about. Well, I was wrong. It was only in 2016 when I became Director of the BRI that I finally recognized the breadth and depth of what BRI does: clinical research, community health interventions, health education, population studies, and more. Since that epiphany, I have been on a mission to let others in on the secret: the BRI, including the Northeast Center for Occupational Health and Safety for Agriculture, Forestry and Fishing (aka NEC/NYCAMH), have had remarkable achievements in research, education, and clinical service that few people truly understand. It is time to change that.

When NEC/NYCAMH produced its *2016 Year in Review* (a striking document produced by Samantha Park at NEC/NYCAMH), I knew that the BRI needed to follow suit and get the news out about what BRI did and does in its varied research corners. So here it is. Our *BRI 2016 Year in Review* will take you on a quick tour of what we did in 2016 and where we are headed. We invite you to be a part of the journey, as a study participant, volunteer, clinical researcher, community member or visitor. Please also check out our meticulously updated web pages, peruse our intriguing publications, or simply take the elevator to the fourth floor of building 6 and have a look.

Before you start flipping pages, I must extend a note of recognition to the BRI director before me, Dr. John May. His tenure as BRI Director has been a tough act to follow, given his many research achievements, his adept integration of NEC/NYCAMH and BRI management and continued clinical practice. Given his avid interest in research and community health, he remains an active member of the BRI and NEC/NYCAMH. We are delighted to still have him on board part-time as a source of continued inspiration, nudging insight, and sage grant writing. I also extend a note of thanks to Dr. Julie Sorensen, the Director of NEC/NYCAMH, who also has the unenviable task of following in Dr. May's footsteps. May we both uphold the legacy of research excellence left to us by Dr. May and others before him.

So where is the BRI headed? My vision as a director is to fine tune the transition from basic science to clinical and community-based research that Dr. May started within the BRI a few years ago. With the completion of BRI renovations in 2016, the lab benches (and mice) are largely gone. The researchers are comfortably huddled together working in their functional teams. Through team science and multi-disciplinary approaches to big (i.e. community and population based) research questions we tackle, I am confident that the BRI will achieve a high level of research productivity.

Given there are many as yet untapped research interests, expertise, and talents of the Bassett clinical staff, the BRI will continue to support the research interests of our clinical colleagues, whatever their field, by providing support in grant writing, program evaluation, data analysis, publication, and dissemination of results. Through increased networking designed to connect scientists and stakeholders across our health system, the region and the northeast, the BRI will continue to foster collaborative partnerships with other academic institutions as well as community-based partnerships. We will continue to provide large research projects with the rural counterpart that they need to generalize their research and that we need to reap the advantages of academic collaboration, i.e. grant funding, capacity building, content expertise and training opportunities for junior faculty, residents and students.

Whew. Sounds like a tall order, but we are well underway. Enjoy the *BRI 2016 Year in Review*.

Anne Gadomski MD, MPH
BRI Director, Attending Pediatrician
anne.gadomski@bassett.org

INSTITUTIONAL REVIEW BOARD (IRB)

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 2016 there were 136 active protocols approved for research activities within the network. During 2016, thirty-one new protocols were approved, 7 of which were clinical trials and 24 of which were non-experimental studies analyzing existing datasets or using qualitative or quantitative methods for collection and analysis of primary data. Twenty-two protocols were completed and terminated in the course of 2016. Other recent activities of the Board included responding to a request for emergency use exemption, clarifying IRB requirements for case studies and quality improvement projects, and preparing operating procedures for projects of multi-site studies that will be using a central IRB.

Who We Are

Chair: David Strogatz, PhD

Regulatory Affairs Associate: Heidi Johnson, CIP

Coordinator Dept. Operations, IRB: Diana Birdsall, MA



CENTER FOR RURAL COMMUNITY HEALTH

The **Center for Rural Community Health** was established in 2011 to work with state and local public health resources and with 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 also looked at surrounding health resources, 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 2016 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

Health Educator: Doris Hill, BS

Supervisor Rural Health Education Network:

Kristin Pullyblank, MS, RN

Community Health Project Coordinator:

Christine Burrington, BS

Administrative Assistant:

Marcia Kozubek, BA

CENTER FOR RURAL COMMUNITY HEALTH PROGRAMS:

- I. Creating Healthy Schools and Communities (CHSC)
- II. 5210
- III. RHENSOM
- IV. Small Health Care Quality Improvement Partnership
- V. Strong Hearts, Healthy Communities
- VI. LongROAD

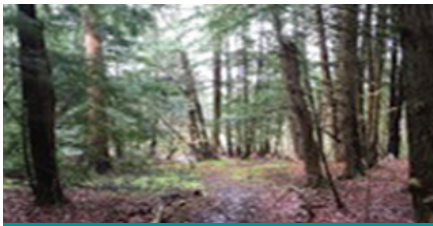


Creating Healthy Schools and Communities



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

During 2016 the Center entered the second 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 twenty-five 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: Walton, Sidney, Otego-Unadilla, Richfield Springs, Jefferson and Charlotte Valley Central School in Davenport.



School Nature Trail



Summer Reading at Library



Main Street Sidney

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 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.

Highlights of CHSC efforts from 2016 include the revival and repair refurbishing of a nature trail at the Sidney Central School campus. The local Boy Scout troop and the United Way are working with the school district to make the trail a resource for the entire community. CHSC education and advocacy has also led to adoption of a Complete Street policy in Sidney with a downtown revitalization plan supported by local businesses to encourage both walking and biking. For the benefit of all regional communities, the CHSC school coordinator served on the planning committee for the “Creating Connections” Professional Development Conference held in October and attended by over 400 teachers and administrators. For our specific contribution to the program, we Program staff organized and convened a complete health and wellness track and recruited a national physical activity advisor from the Clinton Foundation’s Alliance for a Healthier Generation to present the conference keynote address and a two hour classroom physical activity workshop.

This research is funded by New York State Department of Health Contract #DOH01-C30370GG-3450000



II. 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 5-2-1-0 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 2 more communities, Morris and Cobleskill in 2015. To enlist the help of all sectors in all 4 communities, mini-grants in the amount of \$200-2000 were offered to stimulate sustainable activities that promote the goals of 5-2-1-0.

2016 marks the height of 5210 activities in Morris and Cobleskill and celebrates the sustainability of programs in Delhi and Edmeston. Coordinating with Pathfinder Village, a center for working with young adults with developmental disabilities, a produce market was opened in Morris to improve access to fruits and vegetables. In Cobleskill, numerous activities centered around cooking were offered: chefs demonstrating in the local farmers’ market and in the 6th grade classes at the Cobleskill-Richmondville Middle School, Cooking on a Budget for families at the Ryder Elementary School, and chef’s training for the cafeteria staff.

Surveys to determine 5-2-1-0 knowledge and behaviors were administered to the schools in 4th, 5th, 6th, 8th, 9th, and 10th grades at different intervals. Completion of the surveys in Fall of 2017 and analysis of all the data will reveal the success of this childhood obesity prevention strategy.

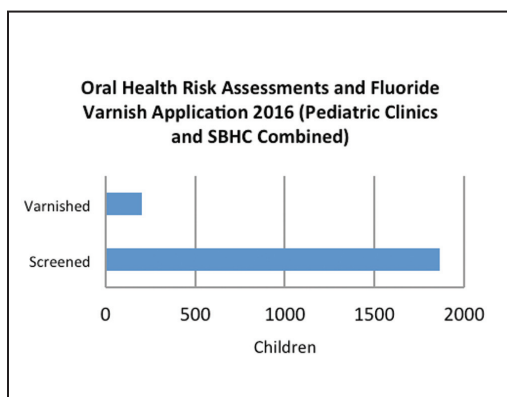


This research is funded by the Stephen C. Clark Foundation



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

The **Rural Health Education Network of Schoharie, Otsego and Montgomery Counties (RHENSOM)** provides educational support for identified community health needs through a five-year grant from the New York State Department of Health, Office of Rural Health. Using evidence-based programming and best practice guidelines, RHENSOM supports the prevention and management of obesity and related chronic diseases, dental health education for children to prevent periodontal disease, and collaborates with local organizations to promote health and wellness initiatives and services.



In 2016, RHENSOM collaborated with Bassett School Based Health Centers, Bassett Pediatrics, St. Mary's Healthcare, and over 60 regional school districts to promote National Children's Dental Health Month. In addition, we offered a Pediatric Grand Rounds in February with Leah Carpenter, DMD, presenting on children's dental health issues. We were also an award recipient for the *2015 Give Kids a Smile Award* funded by the New York State Dental Foundation, and utilized a portion of the award funds to integrate oral health risk assessment and application of fluoride varnish into the pediatric primary care setting during 2016. This figure shows the progress we made in the first year of this initiative.

RHENSOM staff members actively served on several school district wellness committees, providing expert guidance on strengthening wellness policies and promoting a culture of health. In March 2016, we sponsored the school nurse symposium, with guest speaker Hilary Pope, L-CSW, providing insight and guidance to school nurses and social workers on how to care for children with anxiety disorders. RHENSOM also supported the *Feelin' Good Mileage Club* in 13 schools in our region, reaching nearly 3,000 students who walked 17,000 miles as part of this program. The annual *Jr. Iron Chef* competition brought 12 middle school and 12 high school cooking teams from the RHENSOM region to SUNY Cobleskill for the championship cook-off in April. In October, we sponsored two 10-week after school cooking clubs in regional schools to teach youth basic cooking skills and nutrition education.

In the community, RHENSOM was actively engaged in promoting and providing chronic disease self-management programs (CDSMPs) and diabetes self-management programs (DSMPs), offering four CDSMPs and three DSMPs in 2016 that reached 73 individuals. As noted in the next section of this report, RHENSOM is a key partner in expanding these evidence-based programs throughout the Bassett Network and the Central Leatherstocking region. RHENSOM also offers the self-directed *Walk with Ease* program, specifically targeted at increasing physical activity in adults with arthritis or other chronic conditions, and supports tai-chi classes for seniors in Montgomery County. We are a major sponsor of the Central New York chapter of *Girls on the Run*, which reaches over 1,300 girls and families in our region. Finally, we provide staff support for the *UpClose Cardiac Surgery*, in collaboration with the Bassett Department of Surgery. This program educates nearly 1,000 students a year on the importance of establishing heart-healthy lifestyle behaviors early in life.



IV. HRSA Small Health Care Provider Quality Improvement Partnership

LEAD: Lynae Wyckoff, MS

Through the work of RHENSOM, clinical leadership of the Bassett Healthcare Network was introduced to the evidence-based chronic disease self-management programs developed at Stanford University for diabetes (DSMP) and for a range of chronic conditions (CDSMP). In the fall of 2016, Martha Sunkenberg, Senior Director of Bassett Network Health Centers received funding from the **Health Resources and Services Administration (HRSA)** to support quality improvement projects addressing chronic disease in rural primary care settings. The BRI was asked to assist in implementing and evaluating this grant.

With this opportunity, the RHENSOM staff will provide and evaluate expanded access to three self-management programs. Patients with diabetes and/or high blood pressure in Herkimer, Little Falls, Hamilton, Norwich, Sherburne, Cherry Valley, Cooperstown, and Richfield Springs will be referred to DSMP, CDSMP, and Living Healthy with High Blood Pressure (LHHBP), through the newly branded Live Well program. Beginning in March 2017, LHHBP will be offered once a month in each community. The DSMP will be offered in the Spring, and the CDSMP will be offered in the Fall of each year during the three years of funding.



The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving health and achieving health equity through access to quality services, a skilled health workforce and innovative programs.

Lynae Wyckoff, BRI Senior Health Educator and a local coordinator for the Complete Streets initiative, shares her findings with Oneonta Common Council, November 11, 2016.

The Small Health Care Provider Quality Improvement Program is funded by the Health Resources and Services Administration, grant# G20 RH30132.



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

Strong Hearts, Healthy Communities is a collaborative study to test community-based strategies for reducing risk of cardiovascular disease in rural areas of the United States. The study is funded by the National Heart, Lung and Blood Institute of the National Institutes of Health and is being conducted through a partnership between Cornell University, the Bassett Research Institute and Montana State University Extension. In 2015 and 2016, a 6 month, community-randomized trial was implemented in 16 medically underserved rural towns (12 in Montana, 4 in New York). Sedentary and overweight or obese women aged 40 and older were recruited, with a total of 194 enrolled. Intervention participants attended twice weekly exercise and nutrition classes (48 total) that used experiential learning principles and included aerobic exercise, progressive strength training and healthy eating practices. In addition, participants developed and implemented a community engagement project to positively affect the cardiovascular health of residents in their community. During the same time period, women in the control communities attended 6 monthly didactic lifestyle classes without a civic engagement component.

Compared to women in the control communities, women in the intervention communities experienced statistically significant improvement in weight loss and in the American Heart Association Simple 7 metric for favorable cardiovascular risk status (based on summarized changes in smoking, weight, physical activity, healthy diet, blood pressure, and fasting total cholesterol and glucose). Ongoing analyses are assessing additional risk factors (e.g. changes in indicators of fitness and strength) and whether group differences observed at the first follow-up have been maintained. In addition, a second phase of Strong Hearts, Healthy Communities with 12 sites in the Bassett region is planned for 2017, to test intervention strategies that have been modified based on lessons learned from the study's first phase.



Strong Hearts, Healthy Communities is funded by the National Heart, Lung and Blood Institute, National Institutes of Health, grant# R01 HL120702.



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

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 began the enrollment of 3,000 65-79 year old adult drivers in August 2015 at five sites (Cooperstown; Baltimore MD; Denver CO; Ann Arbor MI; San Diego CA). The study's lead institution 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, the University of California at San Diego, and the Urban Institute.

Each of the five sites is enrolling 600 study participants from local primary care clinics. Information being 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. With the support of primary care providers, we are recruiting Bassett study participants from the primary care health centers in Cherry Valley, Cobleskill and Cooperstown. Baseline assessments are projected for completion in February 2017, and the driving experience of these adults will be followed for the years 2015-2019 in the first phase of the LongROAD Study.

Who We Are

Senior Research Scientist: David Strogatz, PhD

Research Coordinator: Andrew Johnson, BS

Research Coordinator: Ida Baker, MA

Research Assistant II: Melinda Robinson, BA



LongROAD Study Sites

The LongROAD study is funded by the American Automobile Association Foundation for Traffic Safety.



MOHAWK VALLEY POPULATION HEALTH IMPROVEMENT PROGRAM (MVPHIP)

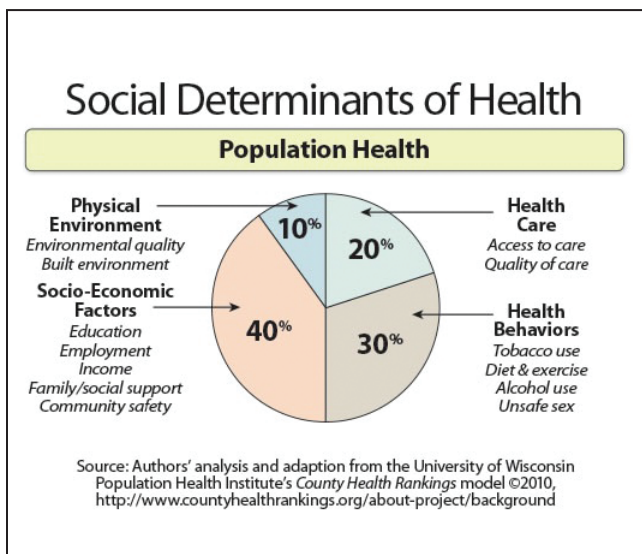
MVPHIP promotes the Triple Aim – better care for individuals, better population health and lower health care costs – through convening of stakeholders for data-driven prioritization. Community members address high priority health challenges using proven strategies outlined in the New York State Prevention Agenda. MVPHIP convenes and supports work teams that identify and disseminate interventions

best suited to promote health and reduce health care disparities in the Mohawk Valley region. The program also serves as a resource to the Delivery System Reform Incentive Payment (DSRIP) program and State Health Innovation Plan (SHIP). The Mohawk Valley region (Fulton, Herkimer, Montgomery, Otsego, and Schoharie counties) is one of eleven regions across the state served by PHIPs that are designated and funded by the New York State Department of Health.

Who We Are

- Principal Investigator:** John May, MD
- PHIP Supervisor:** Aletha Sprague, BA
- Research Assistant II:** Bonita Gibb, BS
- Research Assistant II:** Brittney Watkins, MA

Regional Priorities:



The board and stakeholders selected two regional priorities – obesity and behavioral health. Subsequently, a separate workgroup was formed to address each priority utilizing Prevention Agenda recommended interventions or promising practices. MVPHIP regional priorities address social determinants and work 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, health behaviors (e.g., eating healthy and exercising), social support networks, the physical environment (e.g., safe neighborhoods, affordable housing and access to fresh food), as well as access to health care.

The obesity workgroup chose “Complete Streets” as their focus. According to Smart Growth America, Complete Streets are designed to enable safe access for all modes of transportation including buses, pedestrians, bicyclists, motorized scooters, Amish buggies, and 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. These changes can happen over time as other state or local projects are being implemented. Walking-audits are an effective way to educate the public and community about safe street designs. In September 2016, the MVPHIP facilitated a walking audit in the City of Oneonta by a local Complete Streets expert.

MOHAWK VALLEY POPULATION HEALTH IMPROVEMENT PROGRAM (MVPHIP) *Continued*

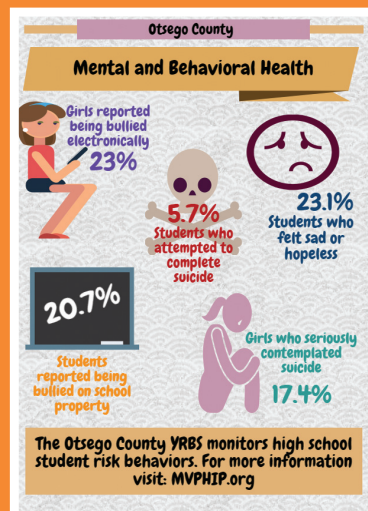
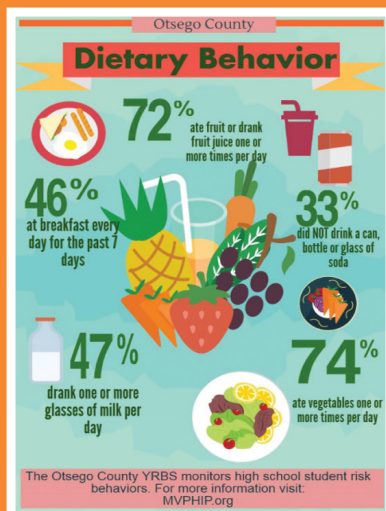
The behavioral health workgroup identified a health disparity among men in seeking mental health services and completion of suicide. Based on the CDC's National Center for Injury Prevention and Control 2015 Suicide Facts at a Glance, males take their own lives at nearly four times the rate of females and represent 77.9% of all suicides. In 2011, middle-aged adults accounted for the largest proportion of suicides (56%), and from 1999-2010, the suicide rate among this group increased by nearly 30%. In response the workgroup approved a license with "Man Therapy", a promising practice. According to the Man Therapy website, Man Therapy is an "interactive mental health campaign targeting working age men (25-54) that employs humor to cut through stigma and tackle issues like depression, divorce, and anxiety".

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.

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. In the Spring of 2016, the MVPHIP collected Otsego County YRBS data and in the Fall of 2016 Schoharie County data was collected. Otsego County data were publicly reviewed and posted on the PHIP website. Infographics provide a snapshot of some behaviors. The Schoharie County data is currently being analyzed for a Spring 2017 presentation.



"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."

MOHAWK VALLEY POPULATION HEALTH IMPROVEMENT PROGRAM (MVPHIP) *Continued*

Community Health Needs Assessments:

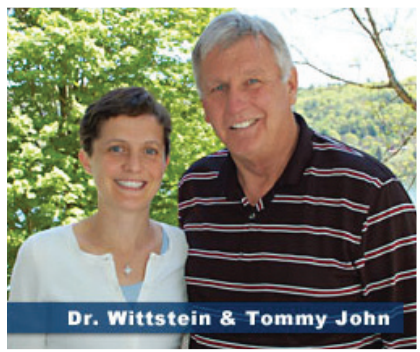
The MVPHIP.org website provides access to extensive secondary data sources. The indicators are charted and compared to state averages, county values, Prevention Agenda and Healthy People 2020 goals. It lists prior values and graphs trends. These indicators were essential in compiling many of the region's local hospital and health departments' 2016 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 2013-2018 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 which 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 MVPHIP website brings non-biased data, local resources, and reporting tools to one accessible, user-friendly location. 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 data sources.

"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."



SHOULDER AND SPORTS MEDICINE



Jocelyn Wittstein, MD

Director of Research, Bassett Shoulder and Sports
Medicine Research Institute
Assistant Clinical Professor of Orthopaedic Surgery,
Columbia University Medical School

Dr. Jocelyn Wittstein focused on increasing enrollment in her study of Inflammatory Cytokines in torn ACL knees. The aim of this study is to understand factors that may contribute to post-traumatic osteoarthritis in ACL torn knees. She has enrolled 5 more subjects in addition to the 20 subjects enrolled as presented at the Bassett Research Institute Seminar in July 2016. Initial analyses have indicated that ACL torn knees have elevated inflammatory cytokine levels, which peak after surgical intervention.

Dr. Wittstein also increased enrollment in the shoulder, knee, and hip patient registries. The shoulder registry currently has 592 subjects with follow up data that will enable analysis of the utility of the Single Assessment Numeric Evaluation (SANE) scores for subjective evaluation of postoperative shoulders. The SANE, a single-question outcome measure, is being evaluated for its potential as a simpler outcomes tool that may be more readily applied by surgeons in clinical settings. Preliminary analyses indicate that SANE is a valid substitute for several more lengthy and time-consuming outcomes assessments commonly used with orthopedic patients.

Lastly, the Youth Baseball Injury Study continued for its fourth year in over 20 regional middle and high schools, with a total enrollment of 465 subjects. A provisional analysis of injury and shoulder range of motion (ROM) was presented at the SUNY Cortland Sports Medicine Symposium (April 2016) and demonstrated a strong correlation between shoulder ROM restriction and reported shoulder pain. Analysis is underway that will include elbow ROM as well.

“The shoulder patient registry currently has 592 subjects with follow up data that will enable analysis of the utility of the Single Assessment Numeric Evaluation (SANE) scores for subjective evaluation of postoperative shoulders.”

CLINICAL RESEARCH DIVISION (CRD)



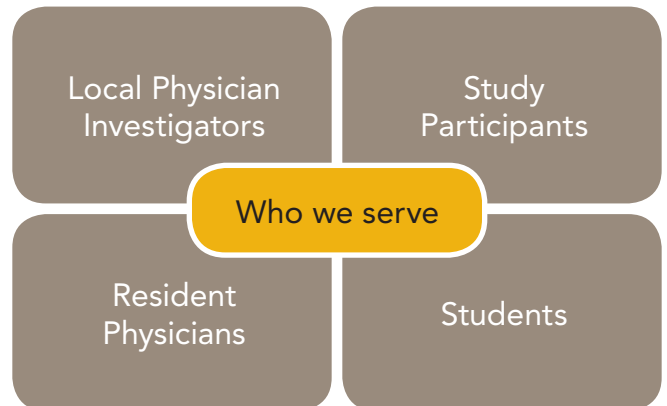
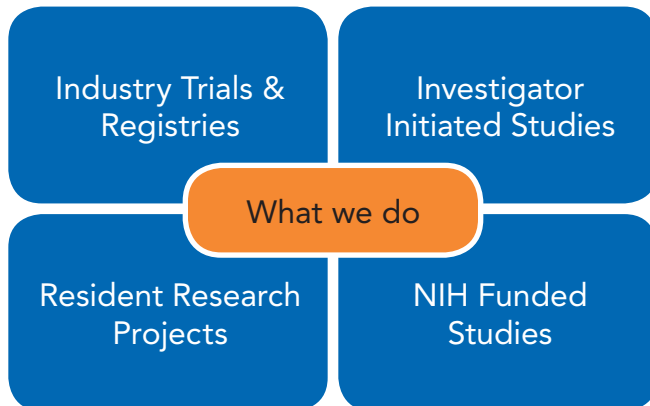
Who We Are

Medical Director: Merle Myerson, MD, EdD, FACC

Nursing Supervisor: Jennifer Victory, RN, CCRC

Nurse Facilitators: Catherine Gilmore, RN, CCRC; Julie Tirrell, RN; Jennifer Amsden, RN

Research Assistant: Bonnie Snyder, BS, MPAS



Current Areas of Research



CLINICAL RESEARCH DIVISION (CRD) *Continued*

Newly Renovated Clinic

In 2016, the CRD physically rejoined the Bassett Research Institute, moving into newly renovated clinic, office, and lab space. The new space includes:

- Consolidated research nurse/coordinator office area
- A dedicated CRD exam room
- Phlebotomy and lab processing area



CENTER FOR BIOSTATISTICS

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, including the **Clinical Research Division**, the **Bassett Evaluation Studies Team**, the **Bassett Center for Rural Community Health**, the **E. Donnell Thomas Resident Research Program**, the **Columbia-Bassett Medical School Research program**, the **Mohawk Valley Population Health Improvement Program**, the **Bassett Shoulder and Sports Medicine Research Institute**, and the **New York Center for Agricultural Medicine and Health/Northeast Center for Occupational Health and Safety**, as well as various other divisions of the Bassett Medical Center.

The center is directed by Paul Jenkins, Ph.D. Dr. Jenkins completed his doctorate in statistics in 1993. The staff of the computing center consists of a junior research investigator/statistician (Melissa Scribani, MPH) and data analyst (Nicole Krupa, BS), with assistance from Moira Riley, PhD, junior research investigator, and Anna Gleboff, MPH, junior data analyst for PHIP.

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

During 2016, the center maintained more than 35 large databases relating primarily to research in obesity, cancer, heart disease, and orthopedics. Center staff also conducted 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. In addition, center staff co-authored 10 peer-reviewed manuscripts, published in occupational health journals, pediatric journals, primary care journals, school health journals, and health services journals.

Who We Are

Director: Paul Jenkins, PhD

Junior Research Investigator/Statistician: Melissa Scribani, MPH

Junior Research Investigator: Moira Riley, PhD

Junior Data Analyst: Anna Gleboff, MPH

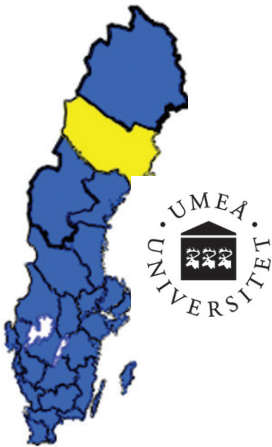
Data Analyst: Nicole Krupa, BS



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 Qualtrics.

CENTER FOR BIOSTATISTICS *Continued*

The CFB staff also contributed to more than six abstracts that were presented at national and international meetings, including the European League Against Rheumatism Annual Meeting, the American College of Gastroenterology meeting, the American Society of Nephrology meeting, and others.



Another important function of the CFB is maintaining the long-standing collaboration with researchers in the Department of Epidemiology and Global Health at Umeå University, Umeå, Sweden. This twenty-five year collaboration has produced numerous peer-reviewed articles, presentations, and grant funding in the areas of chronic disease prevention, obesity, and primary health care delivery. In September 2016, visiting researcher Margareta Norberg, MD, PhD, delivered a research seminar focused on the Västerbotten Intervention Program (VIP), a comprehensive and effective cardiovascular disease prevention program in Northern Sweden. During 2016, the joint research team prepared three manuscripts currently under review, and had an abstract accepted for presentation at the European Society of Cardiology EuroPrevent conference in April 2017. This abstract is focused on the association between obesity and premature cardiac death in Swedish versus U.S. cohorts.

collaboration
 statistics
 biostatistics
design
 input
 data tools analyses
 bioinformatics
 study design
 training

BASSETT EVALUATION STUDIES TEAM (BEST)

The **Bassett Evaluation Study Team (BEST)** is the evaluation division of the BRI. BEST 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 a federally-funded multi-institutional research center (NEC/NYCAMH). BEST 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. BEST uses a variety of evaluation techniques including logic models, timelines, social network analysis, cost analysis, 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 program development, implementation improvement, determining the impact or outcome(s) of a policy or program, or accountability/oversight. Stakeholders and decision makers use evaluation findings to inform decisions about whether to continue, expand, or end a program.

BEST prefers to take a developmental evaluation approach to program evaluation, which means it maintains an active role in program development and implementation by working closely with program directors and staff to understand quarterly evaluation data and apply these results to improving program implementation. BEST uses brief feedback reports and/or dashboards to allow multiple stakeholders to track progress, make adjustments and communicate as implementation proceeds.

BEST has been evaluating the Mohawk Valley PHIP since its inception. MVPHIP is a data-driven effort to mobilize a variety of stakeholders to improve population health. BEST conducted surveys of stakeholder engagement and collaboration at stakeholder meetings and workgroups, tracked board participation and goal attainment, and performed annual social network analysis to assess changes in the level of community collaboration. It will continue this evaluation in 2017. Other BEST projects are described in the following pages.

Who We Are

Director Bassett Research Institute:

Anne Gadomski, MD, MPH

Junior Research Investigator/Statistician:

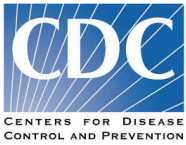
Melissa Scribani, MPH

Research Coordinator: Nancy Tallman, BS

Junior Research Investigator: Moira Riley, PhD

BASSETT EVALUATION STUDIES TEAM (BEST) PROJECTS:

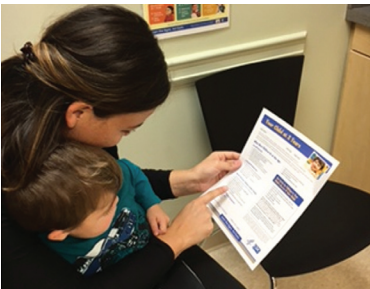
- I. Learn the Signs. Act Early
- II. Gender Wellness Center
- III. The Northeast Center for Occupational Health and Safety: Agriculture, Forestry and Fishing



I. Learn the Signs. Act Early LEAD: Anne Gadomski, MD, MPH

Learn the Signs. Act Early” (LTSAE) research study is funded through the University of South Carolina’s Disability Research and Dissemination Center, funded by the Centers for Disease Control (CDC). LTSAE aims to help parents, caregivers, and others interacting with a child to quickly identify physical or developmental delays (esp. cognitive, emotional, and social delays) and to link the child and family to early intervention services with the goal of achieving the best possible outcomes. BEST is conducting a quasi-experimental (pre-post) mixed methods evaluation using visit audiotapes and parent exit surveys in three Bassett pediatric clinics. We hypothesize that providing parents more information about developmental milestones will increase parent engagement about development during well child visits.

Pre-intervention data were collected in 2016 and show that more than three-quarters of parents reported looking for information related to whether their child’s development was on track. The vast majority (nearly 80%) of those reporting that they looked somewhere said that they looked online. Of these, BabyCenter was by far the most popular site. In the intervention phase of this study, pediatricians received training in the use of LTSAE materials and parents receive LTSAE booklets containing information about developmental milestones before the visit. Posters with developmental milestones are displayed in the clinics. Post-intervention results will be collected until May 2017.



Parent action and doctor interaction regarding child development: Do they change following exposure to “Learn the Signs. Act Early” educational materials?

Learn the Signs. Act Early.



This research is funded by Centers for Disease Control through the Disability Research & Dissemination Center, University of South Carolina (USC) School of Medicine, grant # 5U01DD001007.



Robert Wood Johnson
Foundation

II. Gender Wellness Center

Starting in September 2016, the BEST team began working with FoxCare's Gender Wellness Center (GWC) to provide evaluation services for their Clinical Scholars grant from the Robert Wood Johnson Foundation (RWJF). The \$525,000, three year grant from the RWJF Clinical Scholars Program is being used to establish a Transgender Center for Excellence in the Bassett Healthcare Network.

In 2016, BEST worked with the GWC to plan patient needs assessment for the transgender community served by the GWC. In addition, BEST conducted assessments of trainings provided by the GWC to assess participant knowledge before and after trainings. These assessments are used to improve trainings and gather more information about what other types of trainings should be provided to the Bassett Healthcare Network. In 2017, BEST will continue to provide evaluation support to the GWC by assisting with patient needs assessments, conducting a social network analysis, continuing training evaluations, designing a patient registry and writing papers.



The GWC's multidisciplinary team includes RWJ Clinical Scholars (l. to r.) Christopher Wolf-Gould, MD, Carolyn Wolf-Gould, MD, Tania Villa, RPA-C. Diane Georgeson, MD, Justine Woolner Wise, LMSW

Funded by the Clinical Scholars Program 9/1/16 through 8/31/19



III. The Northeast Center for Occupational Health and Safety: Agriculture, Forestry and Fishing

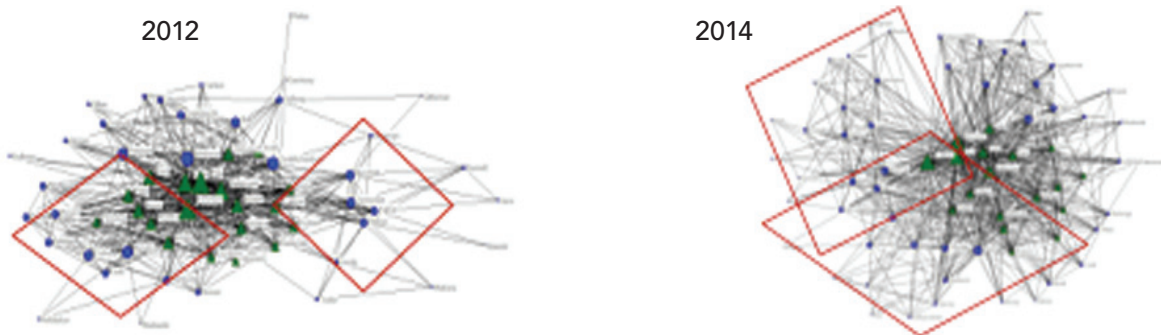
The BEST leads the evaluation for the **Northeast Center for Occupational Health and Safety (NEC)**, an agricultural education, research, and prevention center funded by the National Institute for Occupational Safety and Health (NIOSH). NEC aims to reduce occupational injuries in agriculture, forestry, and commercial fishing sectors the NE region of the USA, from Maine through West Virginia. NEC is awarded funding in five-year cycles, with the most recent cycle concluding in August 2016.

During 2016, BEST conducted quarterly data collection with NEC researchers to track project progress, and documented intermediate outcomes as well as success stories. BEST assisted in drafting the NIOSH-published Program Performance One-Pager (PPOP) for the NEC. In early 2016, BEST conducted the final installment of social network analysis for the 2011-2016 funding cycle. This longitudinal analysis, conducted annually, has demonstrated substantial cross-sector development of the NEC network as well as enhanced productivity with respect to publications. This analytic approach was presented by Melissa Scribani MPH, at the national meeting of the American Evaluation Association in October 2016.

In September 2016, funding was awarded for the 2016-2021 cycle, including the BEST's comprehensive plan for evaluation of the NEC scientific projects, outreach, and marketing/promotion efforts. Data collection has begun for the initial social network analysis. Quarterly data collection with project investigators will commence in March 2017.

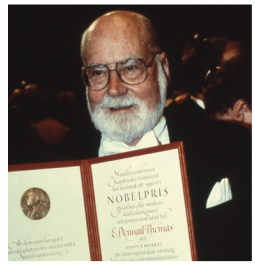
Social network maps illustrating contact between individuals in the NEC network, 2012 and 2014.

Green triangles are NEC internal staff, blue circles are extramural partners; red boxes denote sector-specific sub-networks. Completely separate sector sub-networks in 2012 evolved to an integrated cross-sector network by 2014. In 2012, NEC staff were the most active in the network (their nodes were centrally located and were the largest); a more decentralized pattern developed by 2014 and continued through 2016. This indicates that network members were increasingly interacting with one another, particularly extramural partners.



This work is funded by CDC/NIOSH through a center grant # U54 OH007542-16 "The Northeast Center for Occupational Health and Safety: Agriculture, Forestry and Fishing" Dr. Julie Sorensen (PI).

E. DONNALL THOMAS RESIDENT RESEARCH PROGRAM



Bassett scientists E. Donnall Thomas, Joseph Ferrebee and David Blumenstock pioneered innovation research in bone marrow transplantation, performing the world’s first human organ transplant at Bassett in 1956. Dr. Thomas, who was Physician-in-Chief at Bassett from 1955 to 1963, received the Nobel Prize in Medicine in 1990 for his work in transplantation.

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.

5 New Projects – 9 Active Projects

Karn Wijarnpreecha, MBBS

Principal Investigator: Pascale Raymond, MD
Approved 2016

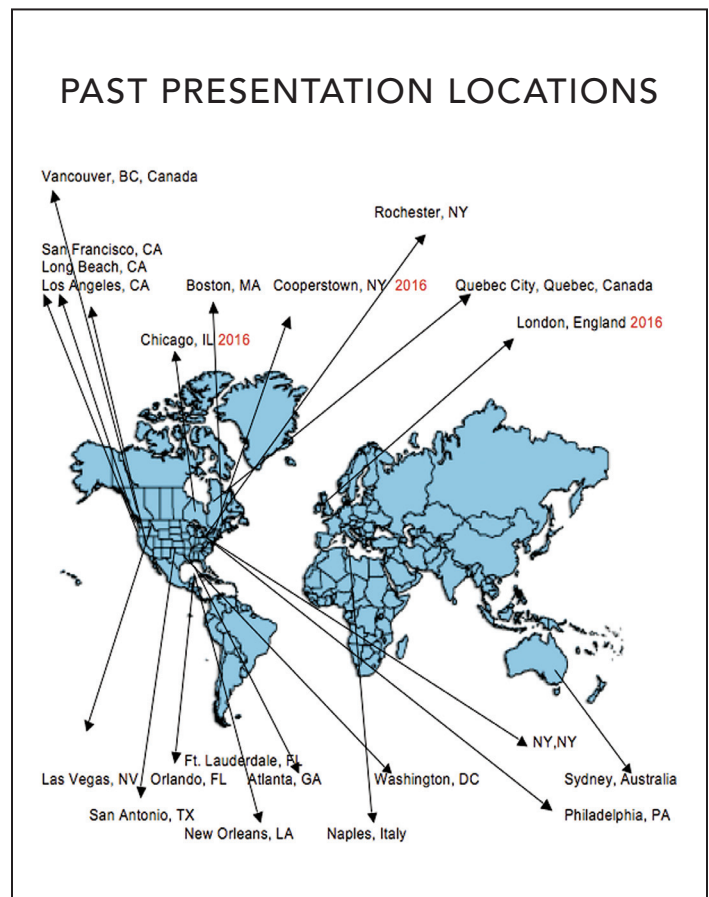
Dr. Wijarnpreecha’s project entitled, “Predictors of mortality in Chronic Liver Disease” was approved November 10, 2016. As a result of this research project, Dr. Wijarnpreecha received a full International Liver Congress (ILC) travel award as a Young Investigator to present the following abstract at the largest hepatic conference in Europe: 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.*

Benjamin Dao, MD

Principal Investigator: Randolph Hutter, MD
Approved 2016

Note: Dr. Dao assumed the role of Resident Researcher in June 2016. The project was originally approved May 6, 2016 with **Ibrahim Sayyid, MBBS** as Resident Researcher.

Dr. Dao presented his 6 month report in December 2016 on his proposal entitled, “Role of Podocan and WNT Pathway in Accelerated Coronary Artery Disease.” The recruitment goal of 900 is going to be difficult to reach in less than three years. The present plan is to do a preliminary analysis to identify key endpoints for which a smaller number of patients may serve.



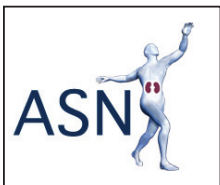
E. DONNALL THOMAS RESIDENT RESEARCH PROGRAM *Continued*

Saeeda Fatima, MBBS

Principal Investigator: Daniel Katz, MD

Approved 2016

Dr. Fatima's proposal entitled, "Podocan and WNT Pathway in the Development of Aortopathy in Bicuspid Valve Disease" was approved May 23, 2016. She submitted 3 month and 6 month updates to the EDT Committee in March 2016 and December 2016, respectively. She will be working with Dr. Jenkins (Biostatistics/Data Director) to do a power calculation on one or several of the most important outcomes of her study.



Anawin Sanguaneko, MD

Principal Investigator: Eric Knight, MD

Approved 2016

Dr. Sanguaneko's project entitled, "The Association Between Weight and Albuminuria," was approved March 8, 2016. The project is working on statistical analysis with the CDC and The ANDRE system. As soon as the final data is complete, Dr. Sanguaneko will be compiling a manuscript for publication. Dr. Sanguaneko had his abstract entitled, "Association Between Weight, Abdominal Obesity, and Albuminuria: Results from NHANES 2003-2014" selected for a poster at the American Society of Nephrology (ASN) meeting in November, 2016 held in Chicago, IL.

Bishoy ElBebawy, MBBS

Principal Investigator: Randolph Hutter, MD

Approved 2016

Note: Dr. ElBebawy assumed the Resident Researcher status on this project in June, 2016. In January 2016, Resident Researcher **Dinesh Voruganti, MBBS**, the original Resident Researcher, presented the proposal entitled, "Clinical Predictive Value of Podocan and WNT Regulatory Molecules in Accelerated Coronary Artery Disease" to the EDT Committee.

Dr. ElBebawy presented his 6 month report at the December 2016 EDT Committee meeting. There is a small overlap between this study and Dr. Dao's study and because it is so small participants will not be enrolled in both. Dr. Hutter stated that this will be a three year study. Because the EDT funding is for two years only, it will be necessary for Dr. Hutter (as PI on the study) to seek outside funding.

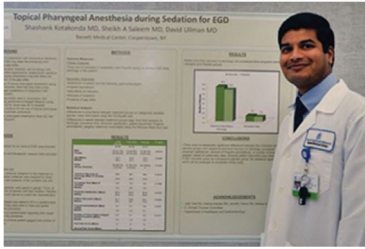
Kulothungan Gunasekaran, MBBS

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 were excluded as per the protocol criteria. In February 2016 an interim analysis was conducted from the completed test results of 30 patients. Dr. Gunasekaran graduated in June 2016.

E. DONNALL THOMAS RESIDENT RESEARCH PROGRAM *Continued*



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. Donnell 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.

Narmadha Panneerselvam, MBBS

Principal Investigator: Daniel Katz, MD

Approved 2015

Note: Dr. Panneerselvam assumed Resident Researcher status on this project June 2016 from the original Resident Researcher, **Abdullah Shahid, MBBS**

Dr. Shahid's proposal entitled, "Clinical Protective Value of Podocan and WNT Pathway Regulatory Molecules on Maladaptive Left Ventricular Response in Aortic Stenosis," was approved October 9, 2015. Dr. Shahid presented his poster at the E. Donnell Thomas Resident Research Poster Day on May 16, 2016. Dr. Panneerselvam assumed Resident Research status on the project after Dr. Shahid's graduation in June 2016. Dr. Panneerselvam presented her 6 month report to the EDT Committee in December 2016.



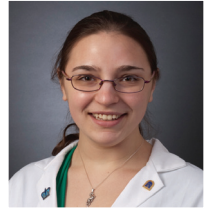
Nataliya Yuklyeva, MD

Principal Investigator: Donald Raddatz, MD

Approved 2014

Dr. Yuklyeva'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. Yuklyeva gave an update on her project reporting good recruitment numbers with no complications. She has begun writing her findings to submit for publication. On May 16, 2016 Dr. Yuklyeva presented her poster (same title) at E. Donnell Thomas Resident Research Poster Day that included her current data. Dr. Yuklyeva's abstract (same title) was presented as a poster at the Annual European Congress of Rheumatology (EULAR) held in London, England at the June 2016 sessions.

MEDICAL STUDENT RESEARCH PROJECT ACHIEVEMENTS 2016



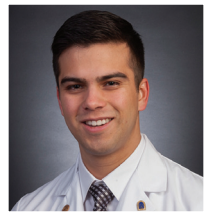
Katherine Schwartz

Class of 2014

Title: "Opening School-Based Health Centers in a Rural Setting: Effects on Emergency Department Use"

Authors: Katherine E. Schwartz, Daphne Monie, Melissa B. Scribani, Nicole L. Krupa, Paul L. Jenkins, August J. Leinhart, Chris L. Kjolhede

Published: *Journal of School Health*. April 2016, Vol. 86(4): 242-249.



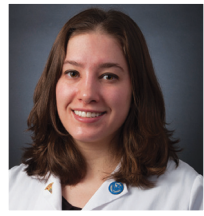
Marcos Lopez

Class of 2017

Title: "Management of Acute Appendicitis in a Rural Population"

Authors: David C Borgstrom, MD; Marcos Lopez Jr., MS; Daniel Hoesterey, MS; Jennifer Victory, RN; Olivier Urayeneza, MD

Published: *American Journal of Surgery*. 2016 Sep;212(3):451-4



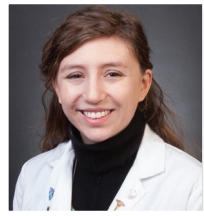
Kathryn Williams

Class of 2016

Title: "Attitudes and Health Behaviors Among Weight "Gainers" and "Maintainers" in Otsego County, NY"

Authors: Kathryn Williams, Giulia Earle-Richardson PhD, Amy E. Freeth MD, Melissa B. Scribani MPH, Daphne Monie PhD

Published: *Health Behavior and Policy Review*. 2016;3(3):280-292



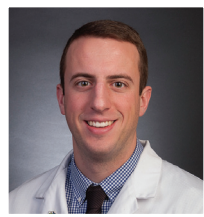
Jemma Benson

Class of 2018

Title: "Methodological Concerns Related to Response Bias in Migrant and Seasonal Farmworkers"

Authors: Jemma Benson, Emma Garrison, Jonathan Dropkin, Paul Jenkins

Published: *American Journal of Industrial Medicine*. 2016 Aug 3. doi: 10.1002/ajim.22646. [Epub ahead of print]



Daniel Hoesterey

Class of 2017

Title: "Management of Acute Appendicitis in a Rural Population"

Authors: David C Borgstrom, MD; Marcos Lopez Jr., MS; Daniel Hoesterey, MS; Jennifer Victory, RN; Olivier Urayeneza, MD

Published: *American Journal of Surgery*. 2016 Sep;212(3):451-4



COLUMBIA UNIVERSITY
College of Physicians and Surgeons



Bassett Healthcare Network
Bassett Medical Center

COLUMBIA-BASSETT PROGRAM

THE BRI WELCOMES NEW STAFF IN 2016



Merle Myerson, MD, EdD, FACC, FNLA joined the BRI as the Medical Director, Clinical Research Division. Dr. Myerson also holds positions at the Bassett Medical Center as Attending Cardiologist and Director, Preventive Cardiology & Lipid Clinic,

Pre-Exercise Heart Screening Program. During her notable career she has held positions at Columbia University, Icahn School of Medicine Mount Sinai, St. Luke's-Roosevelt Hospital, National Naval Medical Center, and the NHLBI National Institutes of Health. In 1996-97 Dr. Myerson completed her Post-Doctoral Fellowship in Preventive Cardiology/Cardiovascular Epidemiology while serving as an Assistant Physician, Department of Medicine and Preventive Cardiology Clinic at the Mary Imogene Bassett Hospital. We welcome Dr. Myerson back "home" to Cooperstown and feel very fortunate to have Dr. Myerson as one of our BRI faculty.



Erika Scott, PhD became a Research Coordinator In 2009 for The New York Center for Agricultural Medicine and Health/ Northeast Center for Occupational Health and Safety in Agriculture, Forestry and Fishing. She received her PhD in

Environmental Health Sciences from State University at Albany, School of Public Health, Albany, NY with a concentration in Occupational Epidemiology. Dr. Scott recently became the Deputy Director of NYCAMH/ NEC. In August we welcomed Dr. Scott to the BRI senior staff as a Research Scientist.



Kathy Kasprovicz accepted a per diem position of Research Assistant II this year. Kathy had retired from Bassett Healthcare after a successful and rewarding career of 42 years. We have coaxed Kathy out of retirement to assist on a variety of

research projects, both new and ongoing.



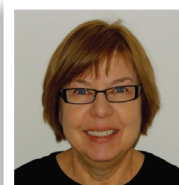
Jennifer Amsden, RN joined the Clinical Research Division in October 2016 as Clinical Research Nurse Facilitator. She previously worked for Bassett as a staff RN in the Womens' Health Clinic. In her new role, Jennifer will be coordinating phase II and III

clinical trials. Her prior experience includes research and diagnostic laboratory work, bench research, and data entry. Jennifer holds a BSN from Hartwick College and a BA in biology from Canisius College.



Brittany Watkins, MA joined The Mohawk Valley Population Health Improvement Program (MV PHIP) as a Research Assistant in December 2016. Brittany's primary responsibility is to collaborate with regional stakeholders to address obesity and

to implement best practices that promote population health in the Mohawk Valley Region. Brittany holds a Bachelor's degree in Community Health and a Master's degree in Management; she has experience working in nonprofit organizations, children's behavioral health services, and community health organizations.



Bonnie Snyder, BS, MPAS has worked in the healthcare field for many years. Bonnie joined the BRI as a Research Assistant and will be assisting our Clinical Research nurses with their many projects. Bonnie will also be assisting with several other BRI research projects.



Danielle Denny, MA accepted a Research Assistant position working primarily with Moira Riley, PhD. Danielle holds a Bachelors degree in Psychology and Criminal Justice from SUNY Oneonta and a Masters degree in Psychology and Education from Mount Holyoke College.

Her previous work experience includes areas of human services and higher education. Danielle plans to use her prior experiences with undergraduate and graduate level research to assist with various projects that are currently in motion or will begin in the near future.

Our Summer Students at the BRI

- **David Zoltick** 3rd year student at the University of Rochester assisted in the BRI Biostatistics & Computing Center
- **Lydia Ulrich**, Colgate graduate assisted on Opioid Study conducting GIS mapping
- **Robert King** Columbia-Bassett Medical School student assisted with School-based Health Clinic project
- **Caleb Edmonds**, Columbia-Bassett Medical School student assisted Dr. Weil
- **Jane O'Bryan**, student at Yale worked as a volunteer intern on the Nursing Resiliency Survey
- **Laura Mickel**, Delhi College nursing student worked with the Clinical Research nursing staff, one month rotation

2016 PUBLICATIONS AND PRESENTATIONS

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Benson J, Garrison E, Dropkin J, **Jenkins PL**. 2016. Methodological concerns related to response bias in migrant and seasonal farmworkers. *Am J Ind Med* 59: 1112-1119.

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Hard D, McKenzie E, Cantis D, **May J, Sorensen J**, Bayes B, Madden E, Stone B, Maass J. 2016. The NIOSH CROPS Demonstration Project: A Study in New York and Virginia with an Emphasis on Youth. *J Ag Safety Health* 22(3):173-86.

Manganello JA, Gerstner G, Pergolino KM, Graham YJ, **Strogatz DS**. 2016. Understanding Digital Technology Access and Use Among New York State Residents to Enhance Dissemination of Health Information. *Journal of Medical Internet Research: Public Health and Surveillance* 2(1):e9. doi: 10.2196/publichealth.4442.

Manganello JA, Gerstner G, Pergolino KM, Graham YJ, **Strogatz DS**. 2016. Media and Technology Use among Hispanics/Latinos in New York: Implications for Health Communication Programs. *Journal of Racial and Ethnic Health Disparities* 3(3): 508-517. doi:10.1007/s40615-015-0169-9.

Seguin, RA, Eldridge, G, Graham, ML, Folta, SC, Nelson, ME, **Strogatz, DS**, 2016. Strong hearts, healthy communities: a rural, community-based cardiovascular disease prevention program. *BMC Public Health* 16(86), doi:10.1186/s12889-016-2751-4.

Myerhoff A, Tinc PJ, **Scott EE**, Wyckoff S. 2016. The development and evaluation of basic first aid curriculum for Spanish-speaking dairy workers. *Journal of Agricultural Safety and Health* Vol. 22:3, pp 163-172.

Myerson M, Armstrong EJ, Poltavskiy E, Fefer J, Bang H. 2016. Tricuspid valve replacement in an HIV-infected patient with severe tricuspid regurgitation secondary to remote endocarditis. *Texas Heart Journal*. 43:514-516.

Schwartz KE, Monie D, **Scribani MB, Krupa NL, Jenkins P**, Leinhart A, Kjolhede CL. 2016. Opening school-based health centers in a rural setting: Effects on emergency department use. *J Sch Health* 86: 242-249.

Scott EE. Establishing methodology for injury surveillance in agriculture and logging. Doctoral Dissertation, University of Albany, School of Public Health. 2016. Electronic publication via ProQuest:<http://gradworks.umi.com/10/14/10142544.html>

Tinc PJ, Ayers P, **May JJ**, Purschwitz MA, Park S, Bayes B, **Sorensen J**. 2016. Implementing a national tractor safety program: Using "whole system in a room" to mobilize partners and implement solutions. *J Agromedicine* 21: 127-131.

Waddimba AC, **Scribani M, Hasbrouck MA, Krupa N, Jenkins P, May JJ**. 2016. Resilience among employed physicians and mid-level practitioners in upstate New York. *Health Serv Res* 51:1-29.

2016 PUBLICATIONS AND PRESENTATIONS

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Lectures and Presentations:

Sorensen, J: "The New York Center for Agricultural Medicine and Health/Northeast Center for Occupational Health and Safety". Rural Health Nursing Seminar, Hartwick College, Oneonta, NY. January 25, 2016.

Gadomski, AM: "Searching for common metrics for research productivity." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. February 16, 2016.

Sorensen, J: "The NY ROPS Rebate Program and National Tractor Safety Coalition." Minnesota House and Senate Agricultural Policy Hearing, Minnesota State Legislature. March 23, 2016.

Sorensen, J: "Understanding Farm Risk and Self-care Behaviors: A Symbolic Interactionist Approach." Society for Applied Anthropology Meetings. Panel Presentation. Session Title: Cultivating Care at the Intersections of Applied Anthropology and Agricultural Health and Safety. Vancouver, BC. CANADA. March 30, 2016.

Myerson, M: "Why Exercise is Real Medicine: Practical tips for Prescription in Clinical Practice." American College of Cardiology, 2016 Scientific Sessions, Chicago IL. April 2, 2016.

Wittstein, J: Two presentations: "Shoulder and elbow injuries in the throwing athletes," and "ACL tears: treatment, surgical outcomes, and current research." Key note speaker, SUNY Cortland 2016 Sports Medicine Symposium, Cortland, NY, April 22, 2016.

Scott, E/Sorensen, J (Co-Lecturers): "Cows, Codfish and Chainsaws: Injury Prevention in America's Most Dangerous Jobs." Mailman School of Public Health, Columbia University, NY, NY. May 2, 2016.

Sorensen, J: "Evaluation of Agricultural Outreach and Safety Training." Agricultural Safety and Health Coalition Meeting, NYCAMH, Cooperstown, NY, NY. May 4, 2016.

Myerson, M: "HIV and Cardiovascular Disease." National Lipid Association, Annual Scientific Sessions Workshop Leader and Speaker, New Orleans LA. May 22, 2016.

2016 PUBLICATIONS AND PRESENTATIONS

Gadomski AM. "Bassett Research Institute: Reviewing Our Vision Statement." Bassett Research Institute Staff meeting, Bassett Medical Center, Cooperstown, NY. May 24, 2016.

Myerson, M: "Exercise Is Medicine." American College of Sports Medicine Annual Scientific Sessions, Boston MA. June 2, 2016.

Hohensee TE: "Sneakers on the Ground: Perspectives on School Wellness Policy Implementation through Creating Healthy Schools and Communities." Centers For Disease Control and Prevention – site visit to New York State Department of Health, Albany, NY. June 21, 2016.

Gadomski AM. "Learn the Signs, Act Early: Helping parents recognize developmental delay." Pediatric Grand Rounds, Bassett Medical Center, Cooperstown, NY. June 28, 2016.

Scott, E: "Motor Vehicle Injuries Involving Agricultural Hazards in New York." Poster Presentation, CSTE Conference, Anchorage, AK. June 19, 2016.

Scott, E: "Establishing a Low-Cost Surveillance System for Agricultural and Logging Injury in the Northeast." Webinar online, AgriSafe. July 17, 2016.

Wittstein, J: "Inflammatory cytokines levels in synovial fluid in ACL torn knees." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. July 19, 2016.

Burrington, C: "Engaging Multiple Community Sectors to Address Childhood Obesity." Community Health Improvement Plan Conference for the Healthy Capital District Initiative, Latham, NY. August 3, 2016.

Gadomski AM and May J. "Bassett Research Institute and Population Health." Population Health Steering Council Meeting. Bassett Medical Center, Cooperstown, NY, August 10, 2016.

Robert King student at Columbia-Bassett Medical School Class of 2019: "Looking Out for Students: An Evaluation of School Vision Screening." Followed by Liane Hirabayashi Research Coordinator, NYCAMH/NEC giving her talk, "GIVE MY CREATION...LIFE! A Brief Overview of Dynamic Complex Systems Modeling and Applications to Public Health." Back-to-Back presentations at the Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. August 16, 2016.

Sorensen, J: "Using a System-Wide, Collaborative Action Model to Launch a National Farm Safety Program." Nordic Meeting on Agricultural Occupational Health and Safety. Seges. Billund, Denmark. August 24, 2016.

Gadomski AM: "Bassett Evaluation Study Team (The BEST)." Gender Wellness Center, Foxcare, Oneonta, NY. September 13, 2016.

Sorensen, J: "Understanding Health Risk Behaviors: A Symbolic Interactionist Approach." Marshfield Clinic Research Foundation Scientific Seminar. National Farm Medicine Center. Marshfield, WI. September 20-22, 2016.

Strogatz DS. "Vehicle Condition and Features: Information from Direct Inspections and Self-Reports." Symposium on Meeting the Challenges of Safe Transportation in an Aging Society. Ann Arbor, MI. September 2016.

Hohensee TE: "Wellness Teams: An Expanding Role in the School Environment". Creating Connections Professional Development Conference, State University of New York at Oneonta, NY. October 28, 2016.

2016 PUBLICATIONS AND PRESENTATIONS

Lectures and Presentations (*continued*):

Strogatz DS: "Looking for Smartphones and Smart Cars in Rural Populations of New York." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. October 2016.

Gadomski AM: "Learn the Signs. Act Early. Parent Impact Study." CDC NCDDD, Atlanta, GA. October 2016.

Scribani MB. "Social Network Analysis of an evolving research center: design, interpretation, and implications." Oral Presentation. American Evaluation Association Annual Meeting, Atlanta GA. October 2016.

Riley, M: "Physician Burnout & Job Satisfaction 2013-2016." UNYTE Scientific Session Poster Presentation, Buffalo, NY. November 7, 2016.

Wittstein, Jocelyn: "Superior Capsule Reconstruction for Irreparable Rotator Cuff Tears." Bassett Physical Therapy Monthly Seminar, Bassett Medical Center, Cooperstown, NY. Nov. 8, 2016.

Jenkins, P: "Combining Multiple Outcomes into a Single Measure of Efficacy in Clinical Trials: The Finkelstein-Schoenfeld Test." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. November 17, 2016.

Strogatz DS, Manganello J, Pergolino KM, Gerstner G, Graham Y. "Rural Access to Mobile Technology and Preferences for Receiving Health Information: Survey of New York State Adults." Annual Meeting of the American Public Health Association, Denver, CO. November 2016.

Myerson, M: "The Latest in Lipids." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown NY. December, 2016.

Scott, E: "Injury Surveillance in Agriculture and Forestry: Chasing the Ambulance to the Hospital." Grand Rounds, Central States Center for Agricultural Health and the Great Plains IDeA CTR Network, Omaha, NE. December 11, 2016.

Invited Guest Speakers:

Peter Lundqvist, PhD, Director, Swedish Centre for Agricultural Business Management Department of Work Science, Business Economics and Environmental Psychology Swedish University of Agricultural Sciences, Alnarp, Sweden presented his lecture: "Strategies for health & safety in Swedish agriculture." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. June 21, 2016.

Lydia Ulrich, a recent graduate of Upstate Institute, Colgate University, Hamilton, NY, presented her lecture: "Geospatial Mapping of Opiate Abuse in New York State." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. Assisting with the question and answer portion of the presentation were Ellen Percy Kraly, Ph.D., William R. Kenan, Jr. Professor of Geography and Environmental Studies, Colgate University, Hamilton, NY and Richard Brown, MD, Sr. Attending Physician, Department of Psychiatry, Bassett Medical Center, Cooperstown, NY. August 3, 2016.

Margareta Norberg, MD, PhD, Assistant Professor, Umeå University, Umeå Sweden; Medical Coordinator of the Västerbotten Intervention Programme (VIP) presented her lecture entitled, "Population-based prevention of CVD – an arena for research. The VIP experience 1985-2016." Bassett Research Institute Seminar, Bassett Medical Center, Cooperstown, NY. September 27, 2016.





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