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| **Meeting/Project Name:** | ORD SPR Advisory Group Monthly Meeting | | |
| **Date of Meeting:** | Tuesday, April 23rd, 2024 | **Time:** | 3:00-4:00 PM ET |
| **Meeting Facilitator:** | J. Constans | **Location:** | MS Teams |

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| MEETING OBJECTIVE |
| Provide the committee with updates and address next steps for future initiatives and projects |

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| ATTENDEES LIST *(check mark indicates attendance)* | | | |
| **Committee Members:** | ☒ Dr. Bob O'Brien  ☒ Dr. Joseph Constans | ☐ Dr. Miriam Smyth  ☒ Dr. Peter Hunt | ☐ Dr. Vetisha McClair |
| **Advisory Group:** | ☒ Dr. Steven Dobscha  ☒ Dr. Stephanie Gamble  ☐ Dr. Brian Marx  ☒ Dr. Bradley V. Watts  ☒ Dr. Edgar Villarreal | ☒ Dr. Stephen O’Connor  ☐ Dr. Susan Strickland  ☒ Dr. Melissa Mehalick  ☒ Dr. David Atkins | ☒ Dr. Wendy Tenhula  ☒ Dr. Lisa Brenner  ☐ Dr. Matthew Miller  ☒ Dr. Jodie Trafton |
| **Others:** | ☒ Maharsi Naidu  ☒ Carol Fowler |  |  |
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| **Support Staff:** | ☒ Imani Braxton-Allen (Titan Alpha) |  |  |

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| MEETING NOTES |
| **Agenda:**   * **3:00-3:10: Review Priority Setting** * **3:10-3:30: Results from SME Survey** * **3:30-3:45: Temperate Check** * **3:45-3:50: Next Steps**   **Announcements:**   * The voting session for the Executive Steering Committee has been scheduled for Tuesday, June 4th, 2024 from 3-4pm ET. * Dr. Kara Beck has joined the executive steering committee. She serves as voting member.   **Notes:**   * Review of Priority Setting   + Current Phase: Refining the collected priority list by conducting surveys discussing priority topics with focus groups. Ranking of topics using structured survey.   + 5 Key Priority Areas based on the survey:     1. Lethal Means Safety approaches to suicide prevention​     2. Community-based interventions for suicide prevention​     3. Family and social network-based interventions and postventions​     4. Psychotherapies and other non-somatic interventions for suicide prevention​     5. Suicide risk screening, evaluation effectiveness, and processes within VA; predictive analytics   + Importance of developing priorities:     - All AMPs are asked to develop and support priorities/priority areas     - The priorities that will develop will be emphasized in Notices of Special Interest (NOSIs) and distributed to the field.       * These NOSIs will indicate topics of interest to investigators (while 1-2 priorities will be heavily weighted, remaining Priorities will be documented for future NOSIs). When investigators respond to a suicide prevention RFA, it will ask if their research will be aligned with one of NOSIs * SME Survey Results   + Survey Questions asked:     - Based on your knowledge of the state of the science, can you identify 1 to 3 research questions that would be especially important to answer and/or key next steps within the overall topic domain of XYZ?​     - *What type of research strategies would best help to answer these research questions? For example, do you believe that advancement would be best realized through clinical trial research, implementation science investigations, development of novel interventions, or improve understanding of the mechanisms through which this topic area is associated with suicide?​*     - *In considering your response above, do you believe that organizations should prioritize funding smaller numbers of large trials to improve confidence in existing findings or more numerous smaller investigations that may lead to improved or novel strategies?​*     - *What type of professional expertise is required for the study teams to pursue the research that you are recommending?*     - **Questions 2 through 4 were found not to be that helpful**   + SMEs     - The survey was sent to 5 induvial out of each SME group     - Lethal Means Safety: **4 out of 5 responses**     - Community-Facing SP Research: **4 out of 5 responses**     - Psychotherapies Research: **4 out of 5 responses**     - Family & social network based interventions + postventions: **4 out of 5 responses**     - Suicide risk screening, predictive analytics: **5 out of 5 responses**   + Thematic Analysis of SME Responses     - For each priority area, the portfolio workgroup captured SME responses and performed a thematic analysis; analyzed the data via an excel sheet to search from common themes amongst responses.     - The goal was to bring forward research questions that would be a part of the NOSI, should the priority area be selected as the primary focus of this portfolio.   + Research Questions on Lethal Means Safety Approaches     - ***4 common areas:*** Understanding Intervention Effectiveness, Community Interventions, Messaging, Understanding Mechanisms of Change   + Research Questions on Community-based Interventions     - ***3 common areas:*** Lethal Means Safety in the Community, Understanding Community/Social Factors in Suicide, What Suicide Prevention Interventions are Best Implemented in the Community?   + Research Questions on Family, Social Network-based Interventions + Postventions     - ***3 common areas:*** Empowering Families to Conduct SP Interventions, Boosting Social Support, and Understanding of Mechanisms of Social Support   + Research Questions on Psychotherapies and Other Non-Somatic Interventions:     - ***3 commons areas:*** Matching Intervention to Risk, Understanding Effective Components, Understanding Power of Existing Interventions   + Research Questions on Risk Screening, Predictive Analysis:     - ***2 common areas:*** Risk Screening and Subsequent SP Programming and Improving Predictive Power   + Summary     - Perceived Advantages & Disadvantages to Funding Each Priority       * Lethal Means Safety         + 70% decedents die by firearm         + Realistic chance to change numbers of death         + Has a VA cohort who can conduct         + Frequent congressional inquires         + OMHSP has contracted for messaging         + Measuring attitudinal/behavior change = large expense       * Community         + Highly valued by VEC         + 2/3 decedents outside of VA         + Involves other priority domains         + Measuring impact is difficult         + Unclear to have a significant change         + Unclear sufficient # of investigators       * Family, Social Network         + Understudied area         + Veteran support         + Involves other priority domains         + Existing studies underdeveloped         + Unlikely to have short-term impact       * Psychotherapies         + Precision medicine synchronize with risk ID         + Direct importance to clinicians         + Unclear feasibility of large trial         + Unclear if it will have impact on total number of deaths       * Risk, Predictive Analysis         + SPC priority         + Can reduce current burden         + Can inform clinical touchpoints         + Can advance precision medicine         + Need OSP support         + Can models be developed by OSP? * Temperature Check/Discussion Questions   + Temperature check: Which topic area should Suicide Prevention Portfolio prioritize for research? ***\*link to answer this question (***[***https://forms.office.com/r/jLZCJ78NEb***](https://forms.office.com/r/jLZCJ78NEb)***)***   + **Results: 45% lethal means safety, 36% Risk, Predictive Analytics, 18% Psychotherapy Research**     - As you weigh priorities, consider the following:       * Which of these domains is most likely to move the needle?       * Which is really ready for investment?       * Where is VA well positioned across those domains to create impact?   + Discussion Questions     - What research domain would be the most impacted by additional funding? Where can funding “push the needle”?     - What other information would be helpful to discuss among the voting members prior to the formal vote of the consensus panel in June?       * Very interested in the idea of tailoring specific treatments to certain people as a high-profile area that do not include traditional psychotherapies but more of non-traditional psychotherapies       * With trying to narrow down on domains, we are going to lose some things/nuances. There are several important areas that may be fall under more than one domain. |
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| **ACTION ITEMS** |  |
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