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| **Meeting/Project Name:** | ORD SPR Advisory Group Monthly Meeting | | |
| **Date of Meeting:** | Tuesday, November 28th, 2023 | **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:** | ☒ Bob O'Brien  ☒ Joseph Constans | ☐Miriam Smyth  ☒ Peter Hunt | ☒ Vetisha McClair |
| **Advisory Group:** | ☐ Steven Dobscha  ☒ Stephanie Gamble  ☒Brian Marx  ☒Bradley V. Watts | ☒ Stephen O’Connor  ☒ Susan Strickland  ☒ Melissa Mehalick | ☒Wendy Tenhula  ☒ Lisa Brenner  ☐ Matthew Miller  ☐ Jodie Trafton |
| **Speakers:** | ☐ Caroline Mwonge  ☒ Maharsi Naidu  ☒ Max Shpilband  ☒ Carol Fowler | ☐ Aman Mehmood |  |
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| **Support Staff:** | ☒ Imani Braxton-Allen (Titan Alpha) |  |  |

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| MEETING NOTES |
| **Agenda:**   * Introduction of newest committee member: Dr. Bradley Vince Watts * Portfolio Stand-up- Summary of portfolio documentation timeline and progress   + Completed- What we’ve done     - Role charter     - Executive committee charter     - Purview statement     - Portfolio analysis report     - Portfolio analysis PPT   + In progress- What we’re doing     - Timeframe: November-February 2024       * Position description       * Critical research priorities   + Future items- What we plan to do     - February-April 2024       * Portfolio RFAs       * Funding Model SOP       * Portfolio performance metrics      * Last Meeting Recall- Overview of 10/24/23 meeting.   + Materials can be found in the 10/24/23 folder on the TEAMS sire (minutes and presentation materials)   + During this meeting (10/24/23) Dr. Kara Beck presented about the query process to consider priorities      * Critical Research Priority Setting Progress- Review methodology utilized to begin priority setting process      * Priorities Discussion- Key identified priority categories and examples of each   + Slides 8-15   + Phase 1: Maharsi and team collected and gathered priorities from 26 sources (including federal agencies), resulting in 186 cumulative priorities and then categorized them into groups   + Evaluation of Priorities     - Process: Gather all 186 priorities across all 26 sources and create “keyword” categories based on the priority language. With the resulting keyword categories, priority statements were drafted to summarize the priorities in that group     - Decision Rule: 5 or more occurrences of a keyword within the priorities results in a new “category”     - Example: Risk occurred 15 times   + Following the categorization of priorities, Joe defined each priority cluster (e.g., Biology/Genomics, Family/Social Network)   + A priority questionnaire was sent out to seek input from multiple stakeholders during the priority setting process. The based on the scoring, the information was populated into a priority matrix   + Summary of Questionnaire:     - Count: 54     - Mean: 6.4     - Median: 4   + Based on the results from the priority matrix, the top 8 categories of Suicide Prevention priorities are:     - Psychotherapy and other non-somatic interventions     - Firearms, lethal means safety     - Community interventions     - Social determinants of Health     - Risk Factor Assessment- Screening     - Biology, Genomics, Brain     - Older Veterans     - LGBTQ+ * Priority Setting Next Steps- Review VEC Interview Guide and align on actions going forward   + Veteran’s Engagement Council Meeting: December 7th, 2023 from 4-5pm EDT     - Key questions for Audience:       * What suicide prevention research topics come to mind as most important for Veterans from your perspective??       * Are there specific patient populations it would be important to study (If this has not come up?)       * Are there any research topics you don’t think are as high of a priority?       * Are there particular topics within this area that come to mind that would be important for VA researchers to work on?   + VEC Priorities Discussion:     - Underlying biology- genetic factors     - Determining the level of risk     - Engaging families and social networks and communities     - New medications or biological approaches (e.g. ketamine)     - Psychotherapies or counseling     - Training clinical providers      * + Next Steps  1. Reliability check on categorizations. 2. Identifying matrix cells that are frequently mentioned. 3. Veteran’s Engagement Council Meeting December 7th 2023, 4-5PM EDT 4. Create survey 5. Determine survey recipients 6. SPCs; OMHSP leadership; 7. Hold discussion about candidate topics 8. Expert presentations? 9. Executive Steering Committee meeting to establish priorities and recommendations for RFAs |
| * + Discussion/Questions     - One main goal is to ensure that we have proper representation. Clinicians and Investigators offer a different perspective     - Carol Fowler mentioned that receiving feedback from Frontline clinicians, Chief medical officers, and Operational Partners in regards to the priorities was very helpful in her priority setting process     - Possibility of using a focus group for clinicians in addition to survey       * This may offer a different perspective from the researchers. Bob O’Brien found it helpful during his priority setting     - Who are the survey respondents? What is their background?       * Brian stated that there can be some type of conflict of interest if some of the respondents have a specific background. For example, someone with a lethal means safety background might have an unconscious bias towards that priority setting.     - Brian stated that the more detailed the survey the better.       * During the last meeting Kara recommended going broader because you can also make it more narrow if need be.     - Including CEPCs (community engagement partnership coordinators) as another frontline group might be helpful. They are similar to a SPCs but they are outward facing/ community facing. They are in the field working with governor’s challenges and coalitions in the community. Therefore they offer a different take on the community take |
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| **ACTION ITEMS** |  |
| **Email specific suggestions about getting feedback from focus groups, providers, etc. to Joe** |  |