

**2017
Research and Evaluation
Committee Members**

**Title and
Affiliation**

**Research
Interests**

**Why I Joined the
Research and Evaluation Committee
and Why the REC is Important**

Our leadership:

C.R. Macchi, Ph.D., LMFT
REC Co-chair 2017-2018



Clinical Assistant Professor
Associate Chair of Internship
Programs

Doctor of Behavioral Health
Program, Arizona State
University

- Integrated behavioral health in primary care
- Medical family therapy
- Provider training, skill development, and evaluation

I joined the committee to work with others exploring and developing approaches to data-driven behavioral health integration.

Tina Studts, Ph.D., LCSW
REC Co-chair 2017-2018



Assistant Professor
Department of Health
Behavior, University of
Kentucky College of Public
Health

tina.studts@uky.edu

- Prevention, early identification, and early intervention with behavioral issues in early childhood
- Implementation of behavioral parent training
- Community-engaged research methods
- Scale development and validation

I joined the Research & Evaluation Committee to build connections with other CFHA members interested in research in integrated care, as well as to help build the research and evaluation capacity and support within CFHA.

Julie Gass, Ph.D.
REC Secretary, 2017-2018



Postdoctoral Fellow
VA Center for Integrated
Healthcare

Adjunct Professor
SUNY, University at Buffalo
Department of Psychology

julie.gass@va.gov

- Behavioral health integration
- Tobacco use precipitants
- Tobacco and alcohol use in patients with complex multimorbidity
- Interventions

This committee appealed to me as I strive to integrate research into on-the-ground clinical care. I also wished to meet like-minded individuals in CFHA to help strengthen my network of professional connections.

Jodi Polaha, Ph.D.
Voting member



Associate Professor
Department of Family
Medicine, Division of Primary
Care Research, East
Tennessee State University

polaha@mail.etsu.edu

- Innovation in mental health service delivery via primary care
- Adapting evidence-based treatments to primary care settings
- Pediatrics
- Interprofessional Education

If you care about bringing strong science to the existing innovation and policy work already in place within CFHA, you should consider joining this committee!

Patti Robinson, Ph.D.
Voting member



Director of Training and
Program Evaluation

Mountainview Consulting
Group

- Assessment of models of integration
- Primary care provider and behavioral health provider stress, burnout, and resilience
- Evaluation of programs addressing chronic pain and addiction to opiates
- Clinical impact of Focused Acceptance and Commitment Therapy (FACT) on primary care patients
- Assessing clinician competence in delivery of (FACT) in primary care

I am a scientist practitioner, committed to delivering and teaching evidence-based interventions, and to assessing the results of dissemination.

Robyn L. Shepardson,
Ph.D.
Voting Member



Clinical Research
Psychologist

VA Center for Integrated
Healthcare

Robyn.Shepardson@va.gov

- Primary Care Behavioral Health model
- Brief interventions for anxiety and depression
- Tailoring treatment to meet patient preferences
- Sexual health

I joined the REC to meet, network, and collaborate with others working to advance the evidence base for integrated care.

Stephanie Trudeau, MS,
LAMFT
Voting member



Doctoral Candidate
Behavioral Health Provider
Research Assistant
Department of Family
Medicine and Community
Health, University of
Minnesota

- Integration of behavioral health into primary care and residency programs
- Provider burnout and wellbeing
- Medical family therapy
- Child and maternal health

As a clinician researcher, I joined this group in order to gain connections and mentorship as I transition from student to new professional. I am passionate about clinical and applied research in primary care and enjoy being connected to a group of likeminded people who want to design and disseminate good science.

Jennifer Wray, Ph.D.
Voting member



Primary Care-Mental Health
Integration Psychologist
Ralph H. Johnson VA
Medical Center

jennifer.wray@va.gov

- Behavioral health integration
- Tobacco cessation
- Brief alcohol interventions

I joined the Research & Evaluation Committee to learn more about ways in which investigators can help shape and execute the research agenda in the field of integrated healthcare and to collaborate with others who are interested in similar research areas.

Our members:

Rebecca Aycock, Ph.D.



Psychologist, Assistant
Professor,
Department of Family
Medicine and Population
Health, Virginia
Commonwealth University

- Behavioral health integration
- Health behavior change
- Women's Health
- Addiction

I joined the REC because I believe it is important for us to examine and evaluate what we do as integrated care providers in order to ensure that we are developing and using best practices, as well as providing evidence to support collaborative care initiatives and policy.

Elizabeth C Banks, Ph.D.,
LMFT



Clinical Assistant Professor

Department of Family
Medicine, East Carolina
University

- Rural Health
- Obesity
- Diabetes
- Women's health
- Peripartum and postpartum mental health
- Integrated care
- Military family health

I joined the REC because I am interested in making sure that I stay tuned in to research and empirical findings, especially since my current position is primarily clinical. I want to work with and learn from colleagues with more research experience. The REC is important because staying active in the research world is critical in informing evidence based clinical care and policy.

Astrid Beigel, Ph.D.



District Chief

Department of Mental
Health, County of Los
Angeles

- Performance/outcome Measurement
- Survey Design
- Quality Improvement
- Evidence Based Treatment Evaluation
- Program Evaluation

I joined the committee because I believe that the understanding and use of research data is critical for the success of any services, and that providers, administrators, and policy makers must learn about and understand its importance.

Nyann Biery, M.S.



Manager of Program
Evaluation

Faculty, LVHN Family
Medicine Residency Program

Lehigh Valley Health Network,
Department of Family
Medicine

- Residency Education and Evaluation
- Quality Improvement
- Behavioral Health Integration
- Geriatrics

I joined REC after attending a CFHA conference with a desire to continue to learn from those in practice. REC provided an opportunity to make connections while contributing to the group.

Thomas W. Bishop, Psy.D.



Assistant Professor of Family Medicine

Quillen College of Medicine, East Tennessee State University

- Interprofessional education
- Measures of the effectiveness of team based care
- Rural integrated models of care

Since my early exposure to research, mentors have always stressed to me that research is very much a collaborative endeavor. I enjoy the desires of REC members in expanding our understanding of integrated practice and the hopes of capturing the passion and inclusion of others in CFHA. I like being a part of a movement in assisting others in how they may incorporate research and investigation into their work, to find joy in doing it, and stir others into sharing what they have learned.

Christine Borst, Ph.D., LMFT



Director of Operations

Center of Excellence for Integrated Care

- Behavioral health integration
- Brief pediatric interventions
- Medical family therapy

I joined the committee to be a part of the new developments in integrated care, to help bring research to practice and practice to research, and to learn from and collaborate with some of the brightest minds in the field.

Brian DeSantis, Psy.D., ABPP

VP of Behavioral Health

Peak Vista Community Health Centers

- Integrated behavioral health clinician/consultant (BHC) outcomes
- Behavioral health screening in primary care

To gain a better understanding of how to conduct clinical research in integrated care settings. Our REC is a forum to share ideas and potentially collaborate on advancing integrated care research.

Jennifer S. Funderburk, Ph.D.



Clinical Research Psychologist

VA Center for Integrated Healthcare
Jennifer.Funderburk@va.gov

- Integration of behavioral health in primary care, with a special focus on brief interventions designed to address depression, alcohol use, insomnia, or multiple risk factors.
- Implementation of integrated healthcare, with specific interests in training and fidelity.

I wanted to participate in helping to foster more research on integrated healthcare as I think it is one of the most important areas that continues to need to be developed. I also wanted to meet others outside of my own small community within my healthcare system who are interested in similar topics.

Angela J. Giles, DBH,
LCSW, BCD, DAPA



Collaborative Care Clinician, Hampton
VA Medical Center

Faculty Associate/Clinical Consultant,
Doctor of Behavioral Health Program,
Arizona State University

- Integration of behavioral health in the primary care setting
- Telehealth
- Diabetes and Depression
- Veterans health

I joined the CFHA Research and Evaluation Committee in order to collaborate with colleagues who were interested in similar research topics. Evaluating evidence-based interventions in the primary care setting is essential to improve both clinical and cost outcomes.

Jeffrey L. Goodie, Ph.D.,
ABPP CAPT, USPHS



Board Certified Clinical Health
Psychologist

Associate Professor

Department of Family Medicine,
Uniformed Services University

- Behavioral health interventions in primary care settings
- Strategies for teaching behavioral health interventions
- Disaster behavioral health

Our committee works to support those who are focused on critical need for systematic evaluations of the impact of integrated care on the health of populations.

Jennifer Hodgson, Ph.D.,
LMFT



Professor

Program Director, Medical Family
Therapy doctoral program

Department of Human Development
and Family Science, East Carolina
University

- Medical family therapy
- Interprofessional collaboration initiatives
- Biopsychosocial-spiritual health
- Integrated care

I joined to support CFHA in its development of a platform for members to share and receive best practice evidence and state of the art methods for studying behavioral health integration

Christopher L. Hunter, Ph.D., ABPP



DoD Program Manager for Behavioral Health in Primary Care, Defense Health Agency

- Primary Care Behavioral Health Model of service delivery
- Effective clinical training strategies

To learn from and collaborate with like-minded professionals.

Kathryn E. Kanzler, Psy.D., ABPP



Director of Integrated Behavioral Health, UT Medicine Primary Care Center

Assistant Professor, Psychiatry & Family and Community Medicine, UT Health Science Center San Antonio

- Integrated behavioral health, especially effectiveness research in the PCBH model
- Chronic pain
- Suicide risk
- Military/Veteran's issues
- Acceptance & Commitment Therapy for chronic disease in primary care

There is a great need for more research on integrated behavioral health and I am excited to be part of a committee that specifically encourages and supports clinical investigators in this important area. There are also abundant opportunities for learning, networking and collaborating.

Rodger Kessler, Ph.D., ABPP



Research Professor
Doctor of Behavioral Health Program
Department of Bioinformatics
School of the Science of Health Care Delivery
College of Health Care Solutions
Arizona State University

Chair, Research and Evaluation
Doctor of Behavioral Health Program,
Arizona State University

Senior Scientist
National Research Network, American
Academy of Family Physicians

- Behavioral health integration
- Chronic illness
- Practice based research

I joined the committee to be part of a group of colleagues who are in-vested in bridging the gap between scientific principles and applied practice.

Rodger.Kessler@asu.edu

Irina Kolobova, Ph.D.



Technical Assistant

Center of Excellence for Integrated Care
Foundation for Health Leadership & Innovation

irinakolobova@gmail.com

- Behavioral health integration
- Social determinants of health
- Financial models for integration
- Medical family therapy
- Graduate medical education

I joined the REC to learn from and collaborate with others who are passionate about integrating behavioral health and physical health services.

Angela Lamson, Ph.D.,
LMFT, CFLE



Professor
Associate Dean for Research and Graduate Studies

College of Health and Human Performance
East Carolina University

lamsona@ecu.edu

- Medical family therapy
- Integrated behavioral health care
- Military and Veteran health
- Health disparities

I joined REC because I believe that research and program evaluation are essential to all of our futures in building and sustaining collaborative healthcare. I am excited to stretch my own skills and knowledge in research and evaluation while also working to make CFHA a great professional home for the next generation of researchers.

Amber J. Landers, PhD,
HSPP



Integrated Child Psychologist
Cambridge Health Alliance

- Children and families
- Ethnic minority and underserved populations
- Behavioral health integration

I joined the CFHA Research and Evaluation Committee to learn from and collaborate with colleagues who have interests in research and evaluation, and to share my clinical and research interests in understanding access issues and promoting mental health of underserved populations, children, and families. The learning, networking, and programming opportunities offered by the REC are invaluable.

Zephon Lister, Ph.D., LMFT



Director of Collaborative Care Program

Assistant Clinical Professor

Department of Family & Preventive Medicine, University of California, San Diego

- Relationships between familial relationships and chronic disease management
- Evaluation and integration of behavioral health into primary care settings
- Mental health and health behavior screening in primary care

I joined the committee to network, collaborate, and become a resource for individuals in CFHA who have a desire to incorporate some level of evaluation, quality improvement, or outcomes assessment into their collaborative care practice.

R. William Lusenhop, MSW, Ph.D., LICSW



Clinical Assistant Professor
Department of Social Work
University of New Hampshire, Durham NH

rwilliam.lusenhop@unh.edu

- Adoption of Integrated Behavioral Health/Interprofessional training by University Health Programs
- Pedagogy and Race/Training clinicians in anti-racist practice

I want to be part of a group focused on increasing access and skills in research for organizations and front-line practitioners. I also want to be a consistent voice highlighting the need to address institutional “isms” that pervade our healthcare system and can be challenged and addressed through the use of research.

Vickie Lynn, MSW, MPH



Doctoral Student and Instructor

College of Public Health
Community and Family Health,
University of South Florida

- Integrated care for people living with HIV and other chronic or multi-morbid health conditions
- Implementation science
 - Evidence-based interventions

I joined the REC to connect with likeminded people who are passionate about Integrated Care and to further explore how this innovative health care delivery model can improve health outcomes and quality of life. The REC can help advance research, service delivery, and positive health outcomes in integrated care settings for people living with multi-morbid chronic health conditions.

Bill McFeature, Ph.D.



Family Healthcare, PCBHI Consultant
Graduate Faculty & Consultant for
Radford University Integrative Care &
Wellness Program

- Integrating PCBHI model designs that align with the NCQA TRIPLE AIM objectives.
- Chronic Illnesses and "Whole Person" assessment and treatment interventions.
- Trauma Informed Care
- Education and Training of health professionals.
- Practice-Based Research
- Focus on Comorbidity Indices - Captured Data and quality outcomes.

I joined CFHA to associate with other professionals who are committed to and aligning to "real time practice" in Integrated Behavioral Health PCMH –PCBHI Model Designs.

Tawnya Meadows, Ph.D.

Chief of Behavioral Health in Primary
Care, Pediatrics
Associate

Geisinger Health System

Assistant Professor, Temple
University

- Level of integration and patient outcomes
- Role of integrated primary care on pediatric access to care
- Cost offset

To collaborate with others in program evaluation/research related to integrated care. To get support and support others in program evaluation and research development.

Stacy Ogbeide, Psy.D., M.S.



Behavioral Health Consultant and
Licensed Psychologist

Assistant Professor, Clinical Family
Medicine Residency Program

Department of Family and Community
Medicine,
University of Texas Health Sciences
Center San Antonio (UTHSCSA)

- Primary care psychology
- Primary Care Behavioral Health (PCBH) model
- Behavioral medicine
- Geropsychology
- Education and training of health professionals

I have an interest in cultivating partnerships within the CFHA membership as well as with other organizations regarding the development and evaluation of competency-based training programs (within PCBH settings), "user-friendly" practice-based research programs, and program evaluation related to the PCBH model.

Patrick A. Palmieri, Ph.D.



Director

Summa Health Traumatic Stress Center

- Integration of primary and behavioral health care
- Trauma-informed care / trauma-informed primary care
- Assessment and treatment of PTSD and comorbid problems
- Trauma and chronic health problems
- Treatment outcomes

I joined the REC to network and collaborate with colleagues who utilize scientific methods to inform clinical practice and improve health care outcomes.

Gary Rosenberg, M.D.



Child Psychiatrist, Chairperson

New Jersey Primary Care Child Psychiatry Collaborative Project

- Behavioral health integration and children

To have access to research interests in the field.

William J. Sieber, Ph.D.



Clinical Professor,
Director of Research, and
Associate Director of Collaborative
Care

UCSD Division of Family Medicine

- Behavioral health integration
- Chronic disease management
- Bio/neurofeedback
- Population science
- Risk factor screening and management

Research and evaluation within CFHA is essential, absolutely critical for the advancement of our field. We ALL can play a role in 'helping others help others' by participating in collaborative research networks, joining discussions about how best to measure what we do and the impact we have. Our society will flourish only when most all of its members contribute in some way to the collection, analysis, and reporting of our activities. We can do this best by collaborating with each other!

Christina L. Vair, Ph.D.



Health Promotion Disease Prevention
Program Manager
W.G. "Bill" Hefner VAMC, Salisbury,
NC.

- Implementation and model fidelity of behavioral health providers (BHPs) in the primary care medical home (PCMH)
- Measurement-based care practices of BHPs in the PCMH
- Program evaluation, service delivery and implementation of VA preventative medicine, wellness, integrative and complimentary health programs

The primary reason I joined the REC was to have a way to engage with others across different organizations and settings who were interested in advancing high quality research in integrated care. I feel the REC is hugely important to supporting the advancement of evidence-based practices and systems innovations in the PCMH, in turn improving patient outcomes.

Other members (not pictured here):

Rola Aamar, Ann Aspnes, Melissa Baker, Thabiso Batsell, Ian Bennett, Dan Blocker, Jean Cobb, Colleen Cordes, Suzanne Daub, Shaun Davis, Emilee Delbridge, Randi Dublin, Halie Dyer, Casey Gallimore, Emma Gilchrist, Limor Gildenblatt, Joe Grasso, Jackie Hahn, Miyoung Yoon Hammer, Waymon Hinson, Dave Johnson, Rusty Kallenberg, Danielle King, Karen Kinman, Polly Kurtz, Angela Lamson, Kaitlin Lilienthal, Amelia Muse, Beth Nolan, Nancy Pandhi, CJ Peek, Mary Peterson, Alejandra Posada, Tina Runyan, Mary Talen, Lauren Tolle, Matthew Tolliver, Jeri Turgesen, Kathryn Woods, Mark Vogel, Toni Watt, Lori Zeman