Cover/Signature Page - Abbreviated Template/Abbreviated Template with Curriculum

Institution Submitting Request: University of Utah

Proposed Title: Center on Mindfulness and Integrative Health Intervention Development (C-MIIND)

Currently Approved Title: n/a

School or Division or Location: College of Social Work

Department(s) or Area(s) Location:

Recommended Classification of Instructional Programs (CIP) Code (for new programs): Current Classification of Instructional Programs (CIP) Code (for existing programs):

Proposed Beginning Date (for new programs): April 2017

Institutional Board of Trustees' Approval Date:

Proposal Type (check all that apply):

Proposal Type (check					
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R401-5 OCHE Revie	w and Recommendation; Approval on General Consent Calendar				
SECTION NO.	ITEM 3				
5.1.1	Minor*				
5.1.2	Emphasis*				
5.2.1	(CER P) Certificate of Proficiency*				
5.2.3	(GCR) Graduate Certificate*				
	New Administrative Unit				
5.4.1	Administrative Unit Transfer				
J.7.1	Administrative Unit Restructure				
	Administrative Unit Consolidation				
5.4.2 XX	Conditional Three-Year Approval for New Centers, Institutes, or Bureaus				
	New Center				
5.4.3	New Institute				
	New Bureau				
5.5.1	Out-of-Service Area Delivery of Programs				
	Program Transfer				
5.5.2	Program Restructure				
	Program Consolidation				
5.5.3	Name Change of Existing Programs				
5.5.4	Program Discontinuation				
3.3.4	Program Suspension				
5.5.5	Reinstatement of Previously Suspended Program				
5,5.5	Reinstatement of Previously Suspended Administrative Unit				

Chief Academic Officer (or Designee) Signature:

I certify that all required institutional approvals have been obtained prior to submitting this request to the Office of the Commissioner.

Signature	Date:	
Printed Name		

¹ CIP codes <u>must</u> be recommended by the submitting institution. For CIP code classifications, please see http://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55.

Program Request - Abbreviated Template University of Utah Center on Mindfulness and Integrative Health Intervention Development (C-MIIND) February 24, 2017

Section I: Request

We are requesting approval for a Center for Excellence that will exert a transformative influence on healthcare by unifying and synergizing disparate research efforts around campus centered on the study of mindfulness and other integrative behavioral health interventions. The Center will maintain a program of federally-funded research on mindfulness and integrative behavioral health approaches that advances science and supports clinical services at the University of Utah and across the nation. Though the home of the Center will reside in the College of Social Work, the Center will draw upon a broad base of expertise across campus, including Center members and affiliates in Psychiatry, Primary Care, Anesthesiology, Neuroscience, Psychology, and Health, among others.

As a platform for supporting research, the Center on Mindfulness and Integrative Health Intervention Development (C-MIIND) will connect researchers and clinicians from across the behavioral and health sciences to conduct pioneering investigations of integrative interventions that target cognitive, emotional, and social processes to improve physical and mental health. Following the NIH Stage model, the Center will conduct translational biobehavioral research to inform the treatment development process by integrating knowledge about basic mechanisms underlying health problems into new therapeutic applications (see Appendix A for a schema of the C-MIIND intervention research and development process). The Center will help coordinate collaborative grant submissions and provide infrastructural resources for the implementation of integrative behavioral health research. Moreover, the Center will define, discuss, and debate current and emerging best practices in integrative behavioral health through peer reviewed scientific publications, national and international conferences, and public relations efforts.

In addition, the Center will promote an integrative behavioral health workforce to meet the needs of the University, the State, and the Nation by providing training in the evidence-based practice of mindfulness and other integrative behavioral health approaches. Center members will develop, test, refine, and optimize integrative behavioral health interventions for implementation and dissemination to health care providers. Intervention programs and training materials will be vetted through rigorous science, ensuring the highest quality delivery of empirically-supported integrative therapies. In this way, the Center will serve as a key hub of training in integrative behavioral health for the Intermountain West, drawing graduate students and post-graduate-level clinical providers from around the country seeking training in new, efficacious treatment modalities. The Center will train these clinicians to provide integrative behavioral health interventions in primary care clinics, hospitals, community mental health centers, addiction treatment facilities, etc. to complement and augment traditional healthcare approaches.

Lastly, the Center will attract top faculty and students to the University of Utah from around the Nation who are interested in studying mindfulness and integrative behavioral health. The Center will provide research opportunities for undergraduate and graduate students, as well as post-doctoral fellows, by connecting these studies to ongoing funded and pilot research projects. Working under the tutelage of skilled Principal Investigators, students will learn how to conduct and disseminate rigorous integrative-behavioral health research and mind-body science. Alumni of the Center will maintain strong ties as their careers progress, retaining access to the latest scientific discoveries and interventions emerging from the Center, along with opportunities to participate in the development of others through mentoring and ongoing collaboration with the Center. In this way, the Center will foster uniquely valuable, enduring relationships between accomplished and aspiring leaders and will support an active, vibrant community of scholars and clinical scientists across the best universities of the world and in national scientific institutes.

Ultimately, the Center will advance a vision of a new model of healthcare, in which behavioral health experts work in tandem with medical providers to address the physical, psychological, and social needs of people afflicted by an array of disorders and illnesses. The synergy generated by such integrative efforts will alleviate suffering and promote human flourishing to a degree unrealized in previous eras of health care reforms.

Section II: Need

Chronic health and mental health conditions exact a tremendous toll on society. For instance, chronic pain affects approximately 116 million Americans – more than diabetes, cancer, and heart disease combined – and costs the U.S. approximately \$635 billion per year (Institute of Medicine, 2011). Other prevalent chronic conditions like obesity, depression, anxiety disorders, and addiction are similarly burdensome, and place a tremendous strain on both the patient and the healthcare system. Despite significant investments in healthcare that often work well to remediate acute or life-threatening conditions, effective management of chronic illness remains elusive.

To address chronic maladies, the medical profession often relies on medications and procedures with iatrogenic effects. A case in point is the current prescription opioid epidemic, which began several decades ago with the effort to alleviate untreated and protracted pain. Well-intentioned attempts to relieve pain spiraled out of control, resulting in opioid over-prescription in the absence of long-term efficacy and safety data. Since that time, prescription opioid abuse and addiction have climbed, and now as many as 1 in 4 people prescribed opioids for chronic pain misuse opioids to reduce psychological distress or assuage craving and withdrawal (Vowles, 2015) — nearly 2 million Americans in 2014 alone (SAMHSA, 2014). Consequently, death related to prescription opioid overdose has quadrupled since 1999, and half of all U.S. overdose deaths involve a prescription opioid (CDC, 2017). Utah is #2 in the nation for prescription opioid deaths, with 6 people dying each week in Utah from prescription opioid overdose (Utah Department of Health, 2014). The problem of prescription opioid misuse exemplifies a gap in traditional models of healthcare and underscores the need for new answers to pernicious and pervasive threats to public health like the other chronic conditions noted above (e.g., pain, obesity, depression, anxiety, and addiction) — conditions that cluster into complex comorbidities which are largely intractable to current medical interventions.

The traditional division between medical and behavioral healthcare results in fragmented care delivery – and patients with the most complex comorbidities slip through these cracks – resulting in greater morbidity and mortality. In contrast, a new model of integrative behavioral health is emerging, in which individuals' needs for physical and psychological treatment are addressed simultaneously in the context of community-based settings (e.g., primary care). This integrative approach recognizes the importance of social, behavioral, and environmental determinants of health, and is based on a solid foundation of decades of basic, translational, and clinical research on biopsychosocial factors linking mind, brain, and body. The following definition of integrative health was recently advanced by leaders in the field (Witt et al., 2017):

Integrative Health is a state of well-being in the body and mind ... that reflects aspects of the individual, community and population. It is affected by: (1) individual biological factors and behaviors, social values, and public policy; (2) physical, social and economic environments; and (3) an integrative healthcare system that involves the active participation of the individual and the healthcare team in applying a broad spectrum of preventive and therapeutic approaches. Integrative Health encourages individuals, social groups and communities to develop ways of living that promote meaning, resilience and well-being across the life course.

With this definition at its core, a solid foundation in translational biobehavioral science, and a focus on developing, testing, and refining integrative health interventions to address chronic mental and physical health conditions, the proposed Center's goals aim to meeting a number of institutional, local, and national needs.

GOAL 1: To maintain a program of federally-funded research on mindfulness and integrative behavioral health approaches, including center-level funding, that advances science while supporting clinical services at the U. Need: As of January 2017, there were 774 ongoing clinical trials of mindfulness alone (clinicaltrials.gov). A search on NiH REPORTER found 181 active NIH-funded projects on mindfulness. With increasing competition for scarce federal research dollars, interest in funding research on mindfulness and integrative behavioral health approaches remains high. Innovations in translational clinical science are needed to propel the field forward.

<u>GOAL 2:</u> To unify and integrate disparate research efforts centered on mindfulness and integrative behavioral health.

<u>Need</u>: Many faculty, students, and scientists on campus are interested in studying mindfulness and other integrative behavioral health approaches. Thus far, their efforts have been highly uncoordinated, resulting in unhelpful competition for fiscal and human resources, rather than synergistic collaboration.

GOAL 3: To promote an integrative health workforce to meet the needs of the University, the State, and the Nation by providing graduate/post-graduate training in the evidence-based practice of mindfulness and integrative health.

Need: Entities like the University of Utah Primary Care Clinics, the University of Utah Wellness Program, the University of Utah Health Plans, the Huntsman Cancer Institute, and University of Utah Hospitals (e.g., Gastroenterology) are looking to hire clinically trained and licensed personnel to deliver mind-body therapies (e.g., mindfulness). Master's level social workers are the ideal profession to deliver integrative behavioral health services, yet the University of Utah does not offer a formalized training program. Already, entities like the University of Utah Primary Care Clinics, the Huntsman Cancer Institute, and the University of Utah Hospital are hiring social workers for integrative behavioral health roles, but graduate students at the College of Social Work currently do not receive expert training in the evidence-based practice of integrative behavioral health. Moreover, post-graduate clinicians (social work, psychology, medicine, and nursing) seek state-of-the-art training in new integrative modalities, but currently the University of Utah does not provide such training.

GOAL 4: To attract top faculty and graduate students interested in studying mindfulness and integrative behavioral health to the University of Utah.

<u>Need:</u> The College of Social Work and the University in general would benefit from additional, highly productive faculty. The existing grant-funded projects among Center members would serve as a catalyst to help promising junior faculty launch their research careers and obtain their own funding.

There are no centers at the University of Utah with these aims, and to our knowledge, there are few (if any) centers around the nation working to accomplish these collective goals. Other centers are either exclusively focused on mindfulness and not on other integrative behavioral health approaches, are not interdisciplinary in nature, do not conduct translational research, are not well integrated into the University community, are disconnected from traditional healthcare contexts, do not have a demonstrated record of federal funding, or only focus on research to the exclusion of training. Thus, many of these other centers differ in focus from the comprehensive vision proposed here.

This Center aspires to assist and support the College of Social Work and its interdisciplinary partners around campus in the development, testing, and dissemination of evidence-based practices in integrative behavioral healthcare. The proposed Center will support the entire span of translational research from "bench to bedside", translating leading-edge discoveries from behavioral science and neuroscience into actionable treatment approaches to be rigorously tested and then disseminated to practitioners working in integrative healthcare contexts. In this way, the Center seeks to complement other integrative health programs at the University of Utah:

- A. Huntsman Cancer Institute Wellness and Integrative Health Center
- B. University of Utah Community Clinic Behavioral Health Integration Project
- C. Office of Wellness
- D. Interprofessional Education Program (IPE)

Vision: The Center on Mindfulness and Integrative Health Intervention Development will be the leading hub of mindfulness and integrative health research in the Intermountain West and USA.

Mission: The mission of the Center on Mindfulness and Integrative Health Intervention Development is to develop, test, and optimize new integrative approaches to healthcare (e.g., Mindfulness-Oriented Recovery Enhancement) that address the needs of the "whole person" by enhancing cognitive, emotional, behavioral, and social factors implicated in well-being and human flourishing within individuals and in local communities.

Section III: Institutional Impact

We will measure our institutional impact in direct and indirect ways. Direct measures will focus on the number and dollars of research grants received by Center members, the number and impact of publications written by Center members, and the number of trainees (both clinical and academic) served by the Center. Indirect measures will focus on the career trajectories of those individuals who participate in Center programming or participate in Center research and publications, the satisfaction of healthcare provider stakeholders delivering interventions developed by Center members, and the quality of life of patients receiving these interventions. Each of these types of metrics will be tracked using both short-term and longer-term impact measures. The Center on Mindfulness and Integrative Health Intervention Development will help to differentiate the University of Utah from competing universities.

The Center will have a robust impact on the institution through Center member and affiliate connections on and off campus. Faculty members and affiliates who will be invited to participate in the Center have key positions within University of Utah Healthcare, including the University Neuropsychiatric Institute, the University of Utah Community Clinics, the University Orthopedic Center, the University Pain Management Center, the Huntsman Cancer Institute, and the Salt Lake VA. Center trainees will serve patients in these settings with integrative interventions developed and tested at the Center. Center invitees also play key roles on University task forces including the Opioid Task Force and the Chronic Pain Task Force, and participate in field practica, as well as residency and fellowship programs for trainees in the health disciplines. Moreover, Center invitees already collaborate with the University of Utah Health Plans to assist in the development of new healthcare initiatives and assess the value of these initiatives for insureds. They also sit on Scientific Review Groups and National Advisory Councils for National Institutes of Health, the Department of Defense, and the Patient Centered Outcomes Research Institute. Through these connections, the Center will enable the University of Utah to have local and national impact.

The Center will help connect students, faculty, and scientists around campus who are interested in studying mindfulness and other integrative behavioral health interventions. Buoyed by the organizing structure of the Center, investigators can connect to collaborate on large, interdisciplinary research proposals and projects. Center infrastructure and intellectual resources (e.g., experts in grant-funded integrative behavioral research) will increase the likelihood of funded proposals. Relationships developed in Center-sponsored activities are likely to boost philanthropic and community support for the University and College, by attracting donors who are interested in making a positive impact on integrative health.

In addition, the Center will raise the visibility of the University of Utah College of Social Work both within and beyond the social work field. No other school of social work in the nation has a center devoted to the practice and study of mindfulness and integrative behavioral health; as such, the Center will enable the University of Utah College of Social Work to stand out among its peers by providing a distinct and unique area of focus. In so doing. the Center will help draw MSW students interested in learning how to deliver mindfulness and integrative behavioral health interventions to clients; the Center will develop clinical training curricula and courses for these graduate students. The Center will also draw PhD students and faculty interested in learning to conduct research on mindfulness and integrative health interventions. Recent indicators demonstrate that such interest within social work is high. For example, the Substance Abuse and Mental Health Services Administration (SAMHSA) and Health Resources and Services Administration (HRSA) partnered with the National Association of Deans and Directors in Social Work (NADD) to sponsor a project to develop, implement, and evaluate a master's level curriculum in integrative behavioral healthcare. And in 2017, the flagship academic conference in social work, the Society for Social Work and Research, hosted a symposium on the mechanisms of mindfulness (led by Dr. Garland) in one of its few, coveted, and highly competitive symposium slots. Highlighting the Center, its funded research projects, and interdisciplinary collaborations in PR and marketing efforts will increase the national ranking and visibility of the University of Utah College of Social Work - and increase College visibility to other academic and scientific disciplines. In addition, the College of Social Work will benefit from the revenues realized through graduate and post-graduate training in integrative behavioral health interventions that will boost the College's outreach efforts.

The impact to the University of Utah will be realized through the development of infrastructure and human capital around research, training, and outreach focused on integrative behavioral healthcare. The Center will house the research infrastructure needed to develop, test, and disseminate evidence-based practices in integrative behavioral healthcare to students, faculty, and community partners.

Specifically, the impact to the University of Utah will be felt in three areas: Research, Training, and Outreach.

In terms of Research activities, the Center will:

- · Support Center members and affiliates in conducting collaborative, leading-edge research
- Sever as a hub for mindfulness and integrative health research on campus and the Intermountain West, by "matchmaking" and pulling together investigators to pursue grants and research
- Pursue P01-level center grant funding
- Attract new faculty and post-doctoral fellows to advance a thematic program of research on mindfulness and integrative behavioral health
- Publish systematic reviews and best practice:guidelines highlighting the state of knowledge on integrative behavioral health interventions

In terms of Training, the Center will:

- Develop and provide training to undergraduate and graduate students from social work, psychology, health, nursing, and medicine in the evidence-based practice of integrative behavioral healthcare
- Develop and provide post-graduate training to healthcare professionals in specific, empiricallysupported integrative behavioral health interventions, including mindfulness-based interventions like Mindfulness-Oriented Recovery Enhancement (MORE; Garland, 2013)
- Pursue training grants (e.g., T32 pre- and post-doctoral fellowship program) to cultivate the next generation of integrative behavioral health intervention researchers

For **Outreach**, the Center will:

- Support an integrative behavioral health workforce to meet the needs of the University, the State, and the Nation
- Serve as a clearinghouse for rigorously vetted information about integrative behavioral healthcare
- Offer conferences or forums at the national or international level to share new research and advance thinking on key issues in mindfulness and integrative behavioral healthcare
- Provide integrative behavioral health services to patients suffering from chronic health and mental health conditions through ongoing clinical research projects that improve participant well-being and advance science

Section IV: Finances

At the current time, the proposed Center is funded by four federal grants (NIH-NIDA, NIH-NCCIH, DOD, PCORI), several private foundation grants, and private donor support (\$11,870,487 in total costs over the next 5 years) that collectively provide salary and benefits for the Center Director, Center members (i.e., co-investigators), staff, and clinicians (a research team comprised of 2 study coordinators, 3 staff research assistants, 2 post-docs, 3 PhD students, 2 Masters students, 2 Bachelors students, 3 therapists, and a 0.5 clinical research nurse), as well as scientific instruments to be used in the conduct of integrative behavioral health research (e.g., psychophysiology systems to record autonomic function and brain activity). The Center has received philanthropic support from the Sorensen Foundation for additional equipment (i.e., an eye-tracking system) and from a College of Social Work alumnus for participant remuneration. Together, these external funding sources will constitute 92% of the funding of the Center over the next 5 years.

The College of Social Work will provide lab and clinical space, meeting spaces, and a modest portion of the salaries for the director and staff (described below in detail in **Center Funding Structures by Year of Activity**) constituting approximately 6% of the total center funding over the next 5 years.

Center-level and individual investigator-led grants will provide the bulk of Center funding, stimulated by a seed grant from the Vice President for Research, which will cover .50 FTE for an Assistant Director of Scientific Programming whose primary responsibility would be to write new grants to support research at the Center. This seed grant from the VPR would constitute 2% of the total center funding over the next 5 years. Though C-MIIND will not offer courses for credit, revenues from the Center's training and community-based programming will also contribute to the financial strength of the Center, and will be used to support costs like travel, transportation/parking, food, incentives, symposia, etc.

The administrative structure of the Center would be comprised of:

- (a) one Director (Garland) at a fixed .10 FTE.
- (b) one Assistant Director of Scientific Programming (Research Assistant Professor) at a fixed compensation level for the first 3 years (0.5 FTE from the College of Social Work, 0.5 FTE from a seed grant from the Vice President for Research), to be fully supported on grants thereafter. This research faculty member will be responsible for supporting grant writing for the Center (e.g., center grant proposals), as well as managing existing scientific projects at the Center.
- (c) .10 FTE administrative staff managing operations and outreach for the Center via interactive communications, website/social media, coordinating meetings, etc.

The Center will aggressively pursue external grant funding from federal agencies, private foundations, and state agencies, as well as philanthropic support from donors, to sustain the Center in future years.

The Center will have an advisory board consisting of the Center directors, Dean of the College of Social Work, College of Social Work business representative(s), Center members/affiliates, and a national advisory board member (Susan Bauer-Wu, PhD, President of the Mind and Life Institute) that will meet once every twelve months to discuss the activities and priorities of the Center.

Center Funding Structures by Year of Activity

Year 1 (2017-2018)	Grant	CSW	VPR	Donor	Total
Role	FTE	FTE	FTE	FTE	FTE
Center Director/CSW Assoc.			<u> </u>		1
Dean for Research	0.88	0.12	0.00	0.00	1.00
Investigators/Center	1 72	0.00			
Members	1.72	0.00	0.00	0.00	1.72
Study Coordinators	2.50	0.00	0.00	0.00	2.50
Post Docs	1.00	1.00	0.00	0.00	2.00
Staff RAs	3.00	0.00	0.00	0.00	3.00
GRAs	1.75	0.25	0.00	0.00	2.00
Administrative Support	0.00	0.10	0.00	0.00	0.10
Grants/Contract Officer	0.00	0.10	0.00	0.00	0.10
Research Assistant Professor	0.00	0.50	0.50	0.00	1.00
FTE Totals	20.82	3.32	0.50	0.00	24.64
Category	Funding	Funding	Funding	Funding	Funding
Personnel Totals	\$1,099,297	\$192,669	\$82,000	\$0	\$1,373,966
Consultant Services	\$13,288	\$0	\$0	\$0	\$13,288
Equipment	\$51,222	\$0	\$0	\$20,000	\$71,222
Materials & Supplies	\$197,775	\$0	\$0	\$0	\$197,775
Travel	\$12,351	\$0	\$0	\$0	\$12,351
Participant Support	\$22,920	\$0	\$0	\$6,500	\$29,420
Other Direct Costs	\$19,751	\$0	\$0	\$0	\$19,751
Subawards	\$55,046	\$0	\$0	\$0	\$55,046
Non Personnel Totals	\$372,353	\$0	\$0	\$26,500	\$398,853
Direct Cost Totals	\$1,471,650	\$192,669	\$82,000	\$26,500	\$1,772,819
Indirect Cost Totals	\$686,235	\$0	\$0	\$0	\$686,235
Funding Totals	\$2,157,885	\$192,669	\$82,000	\$26,500	\$2,459,054
Year 2 (2018-2019)	Grant	CSW	VPR	Donor	Total
Role	FTE	FTE	FTE	FTE	FTE
Center Director/CSW Assoc.					
Dean for Research	0.88	0.12	0.00	0.00	1.00
Investigators/Center					2.00
Members	1.72	0.00	0.00	0.00	1.72
Study Coordinators	2.50	0.00	0.00	0.00	2.50
Post Docs	1.00	1.00	0.00	0.00	2.00
Staff RAs	3.00	0.00	0.00	0.00	3.00
GRAs	1.75	0.25	0.00	0.00	2.00
Administrative Support	0.00	0.10	0.00	0.00	0.10
Grants/Contract Officer	0.00	0.10	0.00	0.00	0.10
Research Assistant Professor	0.00	0.50	0.50	0.00	1.00

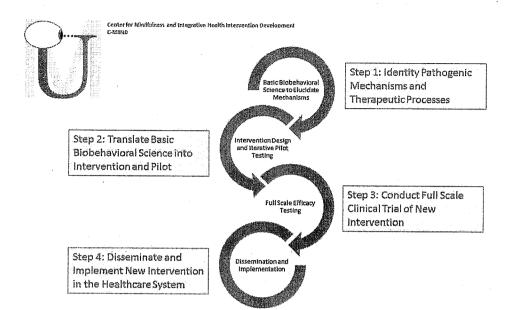
FTE Totals	20.82	3.32	0.50	0.00	24.64
Category	Funding	Funding	Funding	Funding	Funding
Personnel Totals	\$1,152,532	\$198,449	\$84,460	\$0	\$1,435,441
Consultant Services	\$13,288	\$0	\$0	\$0	\$13,288
Equipment	\$14,400	\$0	\$0	\$0	\$14,400
Materials & Supplies	\$178,102	\$0	\$0	\$0	\$178,102
Travel	\$9,805	\$0	\$0	\$0	\$9,805
Participant Support	\$44,420	\$0	\$0	\$3,000	\$47,420
Other Direct Costs	\$23,980	\$0	\$0	\$0	\$23,980
Subawards	\$53,610	\$0	\$0	\$0	\$53,610
Non Personnel Totals	\$337,605	\$0	\$0	\$3,000	\$340,605
Direct Cost Totals	\$1,490,137	\$198,449	\$84,460	\$3,000	\$1,776,046
Indirect Cost Totals	\$697,479	\$0	\$0	\$0	\$697,479
Funding Totals	\$2,187,616	\$198,449	\$84,460	\$3,000	\$2,473,525
Year 3 (2019 -2020)	Grant	CSW	VPR	Donor	Total
Role	FTE	FTE	FIE	FTE	FTE
Center Director/CSW Assoc.	-				
Dean for Research	0.88	0.12	0.00	0.00	1.00
Investigators/Center Members	1.72	0.00	0.00	0.00	1.72
Study Coordinators	2.50	0.00	0.00	0.00	2.50
Post Docs	1.00	1.00	0.00	0.00	2.00
Staff RAs	3.00	0.00	0.00	0.00	3.00
GRAs	1.75	0.25	0.00	0.00	2.00
Administrative Support	0.00	0.10	0.00	0.00	0.10
Grants/Contract Officer	0.00	0.10	0.00	0.00	0.10
Research Assistant Professor	0.00	0.50	0.50	0.00	1.00
FTE Totals	20.82	3.32	0.50	0.00	24.64
Category	Funding	Funding	Funding	Funding	Funding
Personnel Totals	\$1,181,439	\$204,403	\$86,994	\$0	\$1,472,835
Consultant Services	\$16,488	\$0	\$0	\$0	\$16,488
Equipment	\$14,400	\$0	\$0	\$0	\$14,400
Materials & Supplies	\$353,422	\$0	\$0	\$0	\$353,422
Travel	\$8,305	\$0	\$0	\$0	\$8,305
Participant Support	\$36,920	\$0	\$0	\$0	\$36,920
Other Direct Costs	\$23,980	\$0	\$0	\$0	\$23,980
Subawards	\$62,819	\$0	\$0	\$0	\$62,819
Non Personnel Totals	\$516,334	\$0	\$0	\$0	\$516,334
Direct Cost Totals	\$1,697,773	\$204,403	\$86,994	\$0	\$1,989,169
Indirect Cost Totals	\$813,232	:\$0	\$0	\$0	\$813,232
Funding Totals	\$2,511,005	\$204,403	\$86,994	\$0	\$2,802,401

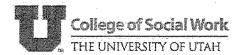
Year 4 (2020 - 2021)	Grant	CSW	VPR	Donor	Total
2 Role	FIE	FTE	FTE	FTE	FTE
Contact Discount Account					
Center Director/CSW Assoc. Dean for Research	0.88	0.12	0.00	0.00	100
Investigators/Center	0.88	0.12	0.00	0.00	1.00
Members	1.72	0.00	0.00	0.00	1.72
Study Coordinators	2.50	0.00	0.00	0.00	2.50
Post Docs	1.00	1.00	0.00	0.00	2.00
Staff RAs	3.00	0.00	0.00	0.00	3.00
GRAs	1.75	0.25	0.00	0.00	2.00
Administrative Support	0.00	0.10	0.00	0.00	0.10
Grants/Contract Officer	0.00	0.10	0.00	0.00	0.10
Research Assistant Professor	0.00	0.50	0.00	0.00	0.50
FTE Totals	20.82	3.32	0.00	0.00	24.14
Category	Funding	Funding	Funding	Funding	Funding
Personnel Totals	\$1,190,952	\$120,931	\$0	\$0	\$1,311,883
Consultant Services	\$16,488	\$0	\$0	\$0	\$16,488
Equipment	\$14,400	\$0	\$0	\$0	\$14,400
Materials & Supplies	\$353,272	\$0	\$0 \$0	\$0 \$0	\$353,272
Travel	\$8,560	\$0	\$0	\$0 \$0	\$8,560
Participant Support	\$36,920	\$0	\$0	\$0	\$36,920
Other Direct Costs	\$12,880	\$0	\$0	\$0	\$12,880
Subawards	\$63,342	\$0	\$0	\$0 \$0	\$63,342
Non Personnel Totals	\$505,862	\$0	\$0	\$0 \$0	
Direct Cost Totals			\$0	and the second second	\$505,862
	\$1,696,814	\$120,931		\$0	\$1,817,745
Indirect Cost Totals	\$808,656	\$0	\$0	\$0	\$808,656
Funding Totals	\$2,505,470	\$120,931	\$0	\$0	\$2,626,401
Year 5 (2021 – 2022)	Grant	CSW	VPR	Donor	Total
7 Role	FTE	FTE	FTE	FTE	FTE
Center Director/CSW Assoc. Dean for Research	0.88	0.12	0.00	0.00	1.00
Investigators/Center Members	1.72	0.00	0.00	0.00	1.72
Study Coordinators	2.50	0.00	0.00	0.00	2.50
Post Docs	1.00	1.00	0.00	0.00	2.00
Staff RAs	3.00	0.00	0.00	0.00	3.00
GRAs	1.75	0.25	0.00	0.00	2.00
Administrative Support	0.00	0.10	0.00	0.00	0.10
Grants/Contract Officer	0.00	0.10	0.00	0.00	0.10
Research Assistant Professor	0.00	0.50	0.00	0.00	0.50
FTE Totals	20.82	3.32	0.00	0.00	24.14
Category	Funding	Funding	Funding	Funding	Funding

Personnel Totals	\$1,195,395	\$124,559	\$0	\$0	\$1,319,954
Consultant Services	\$23,988	\$0	\$0	\$0	\$23,988
Equipment	\$14,400	\$0	\$0	\$0	\$14,400
Materials & Supplies	\$335,702	\$0	\$0	\$0	\$335,702
Travel	\$16,886	\$0	\$0	\$0	\$16,886
Participant Support	\$19,920	\$0	\$0	\$0	\$19,920
Other Direct Costs	\$8,180	\$0	\$0	\$0	\$8,180
Subawards	\$63,880	\$0	\$0	\$0	\$63,880
Non Personnel Totals	\$482,956	\$0	\$0	\$0	\$482,956
Direct Cost Totals	\$1,678,351	\$124,559	\$0	\$0	\$1,802,910
Indirect Cost Totals	\$800,660	\$0	\$0	\$0	\$800,660
Funding Totals	\$2,479,011	\$124,559	\$0	\$0	\$2,603,570

First Five Years (2017 – 2022)	Grant	CSW	VPR	Donor	Total
Role	FTE	FTE	FTE	FTE	FTE
Center Director/CSW Assoc.					
Dean for Research	4.40	0.60	0.00	0.00	5.00
Investigators/Center Members	8.60	0.00	0.00	0.00	8.60
Study Coordinators	12.50	0.00	0.00	0.00	12.50
Post Docs	5.00	5.00	0.00	0.00	10.00
Staff RAs	15.00	0.00	0.00	0.00	15.00
GRAs	8.75	1.25	0.00	0.00	10.00
Administrative Support	0.00	0.50	0.00	0.00	0.50
Grants/Contract Officer	0.00	0.50	0.00	0.00	0.50
Research Assistant Professor	0.00	2.50	1.50	0.00	4.00
FTE Totals	104.10	16.60	1.50	0.00	122.20
Category	Funding	Funding	Funding	Funding	Funding
Personnel Totals	\$5,819,615	\$841,011	\$253,454	\$0	\$6,914,080
Consultant Services	\$83,540	\$0	\$0	\$0	\$83,540
Equipment	\$108,822	\$0	\$0	\$20,000	\$128,822
Materials & Supplies	\$1,418,273	\$0	\$0	\$0	\$1,418,273
Travel	\$55,907	\$0	\$0	\$0	\$55,907
Participant Support	\$161,100	\$0	\$0	\$9,500	\$170,600
Other Direct Costs	\$88,771	\$0	\$0	\$0	\$88,771
Subawards	\$298,697	\$0	\$0	\$0	\$298,697
Non Personnel Totals	\$2,215,110	\$0	\$0	\$29,500	\$2,244,610
Direct Cost Totals	\$8,034,725	\$841,011	\$253,454	\$29,500	\$9,158,690
	ca noc aca	\$0	\$0	\$0	\$3,806,262
Indirect Cost Totals	\$3,806,262	Şυ	70	7.5	

Appendix A: C-MIIND Intervention Research and Development Process





395 SOUTH 1500 EAST, ROOM 101 - SAUT LAKE CITY, UTAH 84112-0260 - (801) 581-6191 - EAX (801) 585-3219 - WWW.SOCWK.UTAH.EDU

March 29, 2017

MEMO TO: Amy Wildermuth

Associate Vice President for Faculty

FROM:

Hank Liese Hand Liese

Dean

RE:

Center on Mindfulness and Integrative Health Intervention Development

On March 21, 2017, I e-mailed to College of Social Work (CSW) faculty the proposal for establishing the Center on Mindfulness and Integrative Health Intervention Development (C-MIIND). I indicated there was strong support for the Center from Dr. Ruth Watkins and Dr. Andy Weyrich, who recommended that we seek provisional Center status at this time. I reported to faculty that while the CSW will serve as the "home" for C-MIIND, with Dr. Eric Garland, Associate Dean for Research, serving as Director, the Center will connect researchers and clinicians across both Main Campus and the Health Sciences. I also noted that Dr. Garland has already secured the federal grants that will serve as C-MIIND's nucleus.

I informed faculty that a vote by our College Council on the Center is not required at this time, but that the SVP Office recommended we circulate the C-MIIND proposal for faculty input. Faculty who have responded are excited by and fully supportive of the Center and its potential. Said one faculty member: "The work and thought you have put into this proposal is amazing. It is visionary and powerful. It will be an attractor for the kind of work that has the potential to transform our health care practices."

I also shared my e-mail and the C-MIIND proposal with Dr. Martell Teasley, incoming Dean for the College of Social Work, who replied: "This is excellent news for the CSW. This development will help place the U as a national leader in mindfulness research. We are on the move!"

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MEMO TO: Ruth Watkins

Senior Vice President for Academic Affairs

FROM:

Hank Liese Hand fiere

Dean, College of Social Work

RE:

Center on Mindfulness and Integrative Health Intervention Development

DATE:

February 28, 2017

I am forwarding to you a proposal, prepared by Dr. Eric Garland, for the establishment of the Center on Mindfulness and Integrative Health Intervention Development (C-MIIND), for which we are seeking conditional three-year approval. While the College of Social Work will serve as the "home" for C-MIIND, with Dr. Garland as Director, the Center will connect researchers and clinicians across both Main Campus and the Health Sciences. Dr. Garland has already secured the federal grants that will serve as the Center's nucleus and ensure a successful launch. He has also reached out to his current collaborators at the U., and they are supportive of the Center.

I am excited at C-MIIND's potential to have a major impact here at the U. and nationally, attracting top faculty and students to the U. and securing continued grant funding. Importantly, the Center supports the University of Utah's goals of developing and transferring new knowledge, engaging communities to improve health and quality of life, and ensuring the long-term viability of the University.