Health System Transformation
Expert Panel Discussion

April 28, 2015
What is Health Services Research (HSR),tpargt
What is AcademyHealth?
Goals of the Student Chapter
Introduction of Expert Panel Members
Expert Panel Discussions
Questions from the Audience
What is Health Services Research (HSR)?
Health Services Research

“The multidisciplinary field of scientific investigation that studies how social factors, financing systems, organizational structures and processes, health technologies, and personal behaviors affect access to health care, the quality and cost of health care, and ultimately our health and well-being. Its research domains are individuals, families, organizations, institutions, communities, and populations.”

– AcademyHealth
<table>
<thead>
<tr>
<th>(#)</th>
<th>Label</th>
<th>Competency</th>
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<tbody>
<tr>
<td>1</td>
<td>Foundational knowledge</td>
<td>Acquire knowledge of the context of health and health care systems, institutions, actors, and environment</td>
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<td>2</td>
<td>Theoretical knowledge</td>
<td>Apply or develop theoretical and conceptual models relevant to health services research</td>
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<td>3</td>
<td>Relevant and important HSR question development</td>
<td>Pose relevant and important research questions, evaluate them, and formulate solutions to health problems, practice and policy</td>
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<td>4</td>
<td>Conceptual models and operational methods</td>
<td>Use or develop a conceptual model to specify study constructs for a health services research question and develop variables that reliably and validly measure these constructs</td>
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<td>5</td>
<td>Study designs</td>
<td>Describe the strengths and weaknesses of study designs to appropriately address specific health services research questions</td>
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<td>6</td>
<td>Data collection and management methods</td>
<td>Sample and collect primary health and health care data and/or assemble and manage existing data from public and private sources</td>
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<td>7</td>
<td>Research conduct management</td>
<td>Execute and document procedures that ensure the reproducibility of the science, the responsible use of resources, the ethical treatment of research subjects</td>
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<td>8</td>
<td>Data analysis</td>
<td>Demonstrate proficiency in the appropriate application of analytical techniques to evaluate HSR questions</td>
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<td>9</td>
<td>Professional development</td>
<td>Work collaboratively in teams within disciplines, across disciplines, and/or with stakeholders</td>
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<td>10</td>
<td>Communication</td>
<td>Effectively communicate the process, findings, and implications of health services research through multiple modalities with stakeholders</td>
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<tr>
<td>11</td>
<td>Knowledge transfer</td>
<td>Knowledge translation to policy and practice</td>
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What is AcademyHealth?

Advancing Research, Policy and Practice
Connections in the National Office: Washington, D.C.

Lisa Simpson, MB, BCh, MPH, FAAP
President and CEO, AcademyHealth

Clare Roche
Student Membership & Chapter Coordinator
Benefits of AcademyHealth Membership

Students, Faculty, and Post-docs

- Save money with discounts
- Find funding and employment opportunities
- Keep up-to-date with complimentary subscriptions
- Build your networking circle and professional support by participating with Interest Groups
- Expand your learning and professional development
- Strengthen the field through advocacy
Goals for the AcademyHealth Student Chapter

✓ Recruit and retain
✓ Elect officers for the 2015-2016 school year
✓ Educate budding health services researchers
✓ Participate in all monthly calls with the national office and other student chapters
✓ Conduct an interdisciplinary health project
Meet the Experts
Expert Panel

Mark V. Williams, MD, FACP, MHM
Director,
Center for Health Services Research

Jing Li, MD, MS
Administrative Director,
Center for Health Services Research

F. Douglas Scutchfield, MD
Faculty Advisor,
AcademyHealth Student Chapter

Glen P. Mays, PhD, MPH
Faculty Advisor,
AcademyHealth Student Chapter
Topic

Training in HSR and Opportunities in the Field
Questions from the Audience

Please raise your hand. State your name and program of affiliation.
Topic

Comparative Effectiveness Research (CER) and Patient-Centered Outcomes Research Institute (PCORI)
AcademyHealth Student Chapter

Health System Transformation Panel Discussion

April 28, 2015
PCORI’s Mission and Vision

- The Patient-Centered Outcomes Research Institute (PCORI) is an independent, non-profit health research organization authorized by the Patient Protection and Affordable Care Act of 2010.

- PCORI funds patient-centered research to assist patients, caregivers, and other stakeholders in making informed health decisions.

**Mission**

PCORI helps people make informed healthcare decisions and improves healthcare delivery and outcomes by producing and promoting high integrity, evidence-based information that comes from research guided by patients, caregivers, and the broader healthcare community.

**Vision**

Patients and the public have the information they need to make decisions that reflect their desired health outcomes.
Focus on Comparative Clinical Effectiveness Research

Per legislation, PCORI funds research that supports clinical comparative effectiveness research (CER)—studies that compare health outcomes and the clinical effectiveness, risks, and benefits of two or more approaches to healthcare.

All applicants should:
- Explain how the research is comparative
- Name the comparators
- State why the comparisons are important to decision-makers
Funding Exclusions: Cost-Effectiveness Analysis (CEA)

- Based on PCORI’s authorizing legislation, PCORI is not permitted to fund studies of CEA.
- **NOTE:** PCORI does fund studies that explore the burden of costs on patients—for example, out-of-pocket costs.

**Examples of CEA**

- Research that conducts a formal CEA in the form of dollar-cost per quality-adjusted life-year (including non-adjusted life-years) to compare two or more alternatives
- Research that directly compares the overall costs of care between two or more alternative approaches as the criterion for choosing the preferred alternative
National Priorities for Research

Assessment of Prevention, Diagnosis, and Treatment Options

Improving Healthcare Systems

Communication & Dissemination Research

Addressing Disparities

Accelerating PCOR and Methodological Research
Key Features of PCORI Research

Comparative Clinical Effectiveness Research

► Patient-centered
► Answering questions that matter to patients and other clinical decision makers
► Comparisons of outcomes that matter to patients
► Engage patients and stakeholders at every step
Key Features of PCORI Research

Research should adhere to PCORI’S Methodology Standards:

Methodology Standards: 11 Broad Categories

1. Formulating Research Questions
2. Patient-Centeredness
3. Data Integrity and Rigorous Analyses
4. Preventing/Handling Missing Data
5. Heterogeneity of Treatment Effects
6. Data Networks
7. Data Registries
8. Adaptive and Bayesian Trial Designs
9. Causal Inference
10. Studies of Diagnostic Tests
11. Systematic Reviews
PFAs – Broad and Targeted

**Broad PFAs**
*Wide range of CER topics*

**Targeted PFAs**
*Specific high-priority CER topics*

- AO
- IHS
- CDR
- AD
- Methods
- Obesity
PFA Overview: The Effectiveness of Transitional Care

PCORI intends to fund research that:

Will produce knowledge that is meaningful and useful to patients, caregivers, providers, hospitals, payers, etc. when making decisions about care provided to patients during transitions from the hospital to post-acute settings.

- Study widespread experimentation in transitional care now underway across 500+ U.S. communities
- Measure the effectiveness and scalability of specific clusters of transitional care services
- Focus on outcomes that are important to patients, including re-admission rates.
- Address the needs of specific sub-populations
- Account for varying healthcare contexts

Available funds: Up To $15 Million
Number of Awards: 1
Study Period: 3 years
Project ACHIEVE
Achieving Patient-Centered Care and Optimized Health In Care Transitions by Evaluating the Value of Evidence
<table>
<thead>
<tr>
<th>Site</th>
<th>Project Team – Core</th>
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</table>
| University of Kentucky                   | Mark V. Williams, MD  
Jing Li, MD, MS  
Glen Mays, PhD, MPH |
| Patient Representatives                  | Martha Rosett Lutz, Terry Davis,  
Marty Hatlie, Becky Callicoatte |
| Caregiver Representatives                | Carol Levine, John Schall,  
Jasmine Pearlman, Karla Izquierdo |
| Westat                                   | Joann Sorra, PhD  
Deborah Carpenter, RN, MSN |
| Boston Medical Center                    | Brian Jack, MD, MPH  
Suzanne Mitchell, MD, MS |
| University of Pennsylvania               | Mary Naylor, PhD, RN  
Karen Hirschman, PhD, MSW |
| Telligen                                 | Jane Brock, MD, MPH  
Brianna Gass, MPH |
| Kaiser Permanente South California      | Brian Mittman, PhD  
Huong Nguyen, PhD, RN |
ACHIEVE Partners

- Health Research & Educational Trust (American Hospital Association)
- Joint Commission Resources
- Essential Hospitals Institute (America’s Essential Hospitals)
- National Association of Area Agencies on Aging (n4a)
- Caregiver Action Network
- United Hospital Fund
- Project Patient Care
- LSU Health Sciences Center
- University of Illinois at Chicago
ACHIEVE Work Groups

Scientific Advisory Committee

Core Research Team

Patient/Caregiver/Stakeholder Advisory Groups

Coordinating Center - UK

Transitional Care Components & Measures

Interview Guide & Survey Development

Data Analysis, Report & Evaluation

Recruitment & Engagement

Data Collection & Management

Dissemination & Implementation
ACHIEVE Specific Aims

1. Identify the transitional care outcomes and components that matter most to patients and caregivers.

2. Determine which evidence-based transitional care components (TCCs) or clusters most effectively yield patient and caregiver desired outcomes overall and among diverse patient and caregiver populations in different types of care settings and communities.

3. Identify barriers and facilitators to the implementation of specific TCCs or clusters of TCCs for different types of care settings and communities.

4. Develop recommendations for dissemination and implementation of the research findings on the best evidence regarding how to achieve optimal TC services and outcomes for patients, caregivers and providers.
ACHIEVE Study Design – 3 years

• **Phase 1 / Year 1**
  - Focus Groups (Patient, Caregiver, Provider)
  - Site Visits – Hospitals and Community Based Organizations (CBOs)
  - Survey Development
  - Recruitment – Hospitals and CBOs

• **Phase 2 / Years 1 - 3**
  - Retrospective Study
    - Transitional Care Services Environmental Scan
    - Site Visits – Hospitals and CBOs
    - Data Collection (Clinical & Claims) and Analysis
  - Prospective Study
    - Recruitment – Patient, Caregiver, and Provider
    - Survey Conduct – Patient, Caregiver, Provider
    - Data Collection (Clinical & Claims) and Analysis
Implementing the Learning Health System: From Concept to Action

Figure Legend.

The 6 phases of the rapid-learning health care system, from scanning to dissemination.

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Learning Health System

• Transformation in how we *generate* and *apply* knowledge

• Leverages health information technology (HIT)
  – Health data infrastructure
  – Access and apply evidence in real time
  – Draw new knowledge from real-world care-delivery processes to promote innovation and health system change
  – Grounded in rigorous research

• Bidirectional discovery
Evidence and Practice

• Evidence informs practice
• Practice informs evidence
• Immerse research into real world settings to create shared opportunities
• Iterative; innovations refined and new ones introduced to meet changing goals
Questions?