

# Welcome

- Advisory Panel co-chairs Doriane Miller and Grant Jones will moderate this teleconference
- Use Meetingbridge “raise your hand” feature to alert moderators when you want to speak and then unmute your phone
- Please state your name when you speak for the benefit of our public listeners
- This is a public teleconference; meeting will be archived on PCORI website



## **Addressing Disparities Program: Advisory Panel Meeting Teleconference**

*September 11, 2013*

*1:00 PM to 4:00 PM ET*

Patient-Centered Outcomes Research Institute

# Agenda

- Welcome
- Introductions
- Addressing Disparities conceptual framework and current portfolio
- Progress on ranked topics from April 2013 Advisory Panel meeting
- Future CER disparities topics
- Recap of today's meeting
- Next steps

# Addressing Disparities Advisory Panel Members

**Alfiee Breland-Noble, Ph.D., M.H.Sc.**

Director of The AAKOMA Project  
Assistant Professor, Department of Psychiatry  
Georgetown University Medical Center

**Tammy Burns, Pharm.D., B.C.P.S.**

Clinical Assistant Professor of Pharmacy Practice and  
Medicine  
Creighton University School of Medicine

**Monique Carter, M.S.**

Senior Research Scientist  
AROG Pharmaceuticals

**Alyna Chien, M.D., M.S., M.S.**

Assistant Professor  
Harvard Medical School, Boston Children's Hospital

**Echezona Ezeanolue, M.D., M.P.H., F.A.A.P., F.I.D.S.A.**

Associate Professor, Pediatrics and Director, Maternal-  
Child HIV Program  
University of Nevada School of Medicine

**Kevin Fiscella, M.D., M.P.H.**

Professor, Family Medicine and Public Health Sciences  
Associate Director, Center for Communication and  
Disparities Research  
University of Rochester

**Martina Gallagher, Ph.D., M.S.N.**

Assistant Professor, School of Nursing  
University of Texas Health Science Center

**Venus Ginés, M.A., P/C.H.W.I.**

Instructor, Chronic Disease Prevention and Control  
Research Center  
Baylor College of Medicine

**Martin Gould, Ed.D., M.A.**

Senior Policy Analyst  
U.S. Department of the Treasury

**Jacqueline Grant, M.D., M.P.A., M.P.H.**

Southwest District Health Director  
Georgia Department of Public Health

**Chien-Chi Huang, M.S.**

Founder, Asian Breast Cancer Project  
Executive Director, Asian Women for Health

# Addressing Disparities Advisory Panel Members (continued)

**Liz Jacobs, M.D., M.A.P.P.**

Associate Professor, General Internal Medicine  
Associate Vice Chair, Health Services Research,  
Department of Medicine and Health Innovations  
Program  
University of Wisconsin—Madison

**Grant Jones, B.S. (Co-Chair)**

Founder and Executive Director  
Center for African American Health

**Patrick Kitzman, Ph.D., M.S.P.T.**

Associate Professor, Physical Therapy  
University of Kentucky

**Doriane Miller, M.D. (Co-Chair)**

Director, Center for Community Health and Vitality,  
Urban Health Initiative  
Associate Professor, Department of Medicine  
University of Chicago

**Alan Morse, J.D., Ph.D.**

President and Chief Executive Officer,  
Jewish Guild Healthcare  
Adjunct Professor of Ophthalmology,  
Columbia University

**Tiffany Nelson, M.P.A.**

Walgreens/Take Care Health Systems  
Director, Site Operations, Western Region  
Employer Solutions Group

**Carmen Reyes, M.A.**

Center and Community Relations Manager, Los  
Angeles Community Academic Partnership in Research  
in Aging  
University of California, Los Angeles

**Russell Rothman, M.D., M.P.P.**

Associate Professor, Internal Medicine and Pediatrics  
Director, Vanderbilt Center for Health Services  
Research  
Chief of Internal Medicine/Pediatrics  
Vanderbilt University

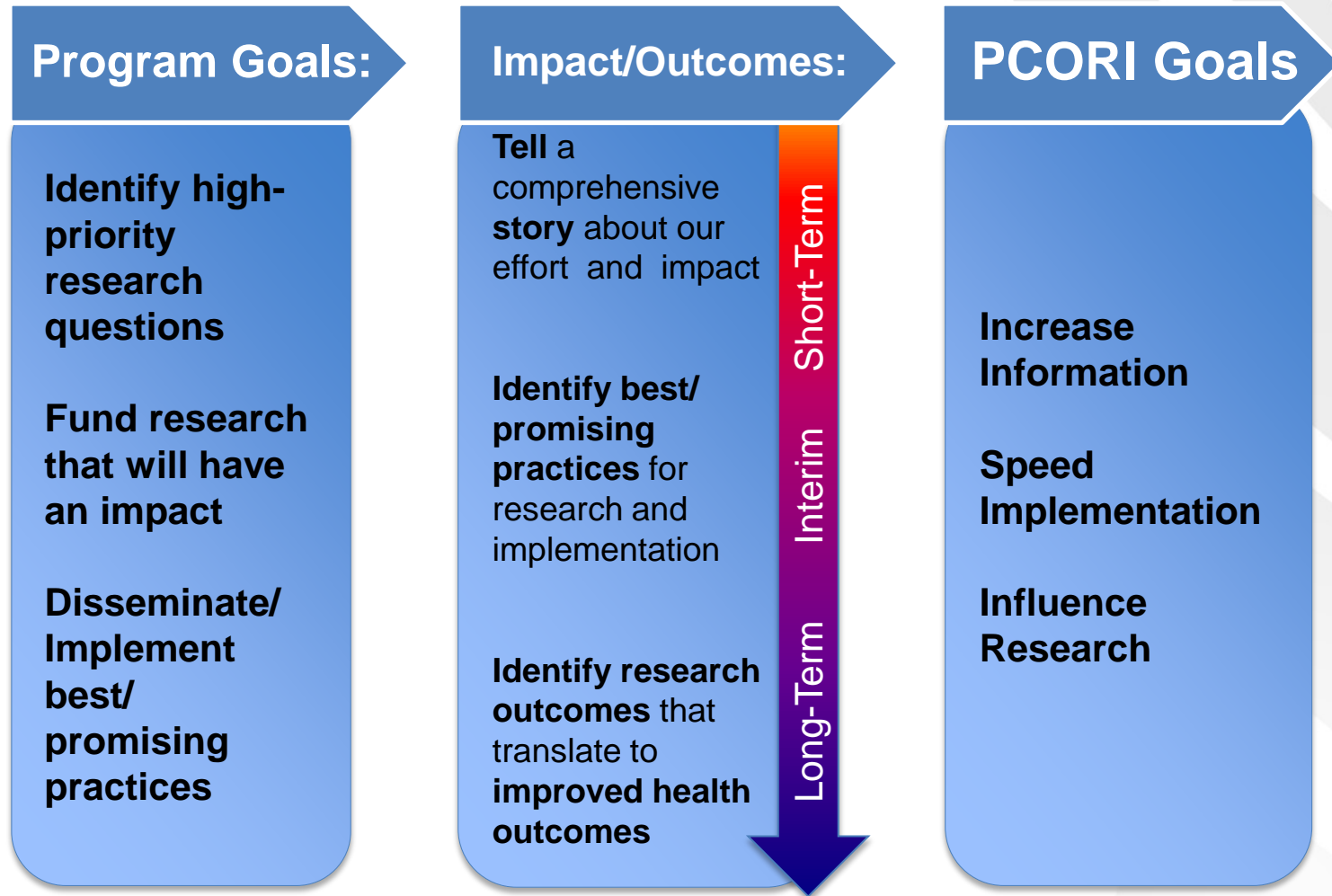
**Mary Ann Sander, M.H.A., M.B.A., N.H.A.**

Vice President, Aging and Disability Services  
University of Pittsburgh Medical Center Community  
Provider Services

**Deborah Stewart, M.D., M.B.A.**

Medical Director  
Florida Blue

# Addressing Disparities Program



Ongoing Internal and External Programmatic Evaluation

# Develop Conceptual Framework: Addressing Disparities Program

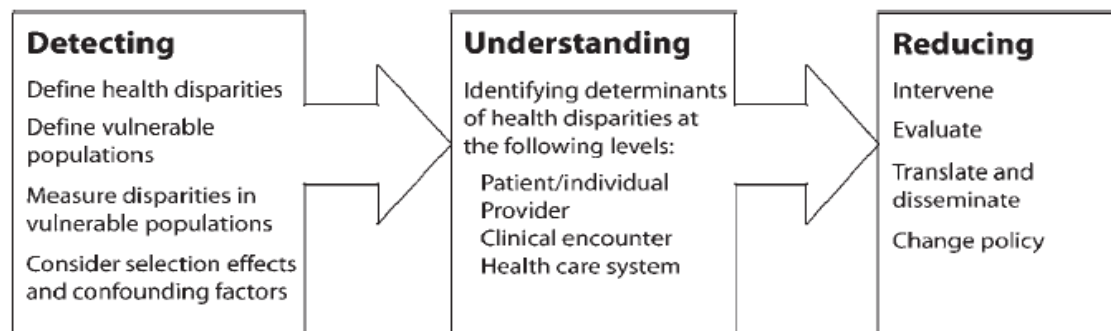
- For grounding the program and active portfolio management
  - Identify key components/domains of the conceptual framework
  - Develop a classification system of funded projects (a gestalt)
  - Use classification system to develop a dashboard of funded projects and map to conceptual framework
    - Inform where we have invested, where we need to invest, and where we have made an impact in the near-term
    - Move toward the longer-term goal of reducing/eliminating disparities in care

# Components to Include in the Conceptual Framework

- Draw on previously accepted frameworks (e.g., IOM: Unequal Treatment Report, Flores Model, Kilbourne Model)
- Addressing Disparities Program Priority Areas (condition specific) and Cross Cutting Issues (communication barriers, safety-settings, etc.)
- PCORI Criteria for addressing information gaps



# Sample Components of a Conceptual Framework



*Note.* In our framework, the health disparities research agenda progresses in 3 sequential phases of research. Phase 1 (detecting disparities) informs phase 2 studies (understanding disparities), which in turn informs phase 3 research (interventions to reduce or eliminate disparities).

**FIGURE 1—The 3 phases of the disparities research agenda.**

Levels		Potential Interventions
Individual	Child	Evidence-based standards of care, coordination of care
	Parent-child	Education, empowerment, self-efficacy training
	Family	Education, empowerment, self-efficacy training, social services
Health systems	Provider	Medical education, resident training, curriculum development, continuing education
	Local	Targeted programs for care, interpreter services, coordination of care, multidisciplinary care team approaches (availability of support services), quality improvement efforts
	National	Quality improvement initiatives, workforce diversity, funding priorities, national standards of care
Community	Neighborhood	Community health workers, community-based participatory research initiatives, public-private partnerships, community economic development
	Local government	Targeted programs, funding priorities
Societal		Public health initiatives, health care financing and organization, patient protections and civil rights enforcement, support of affirmative action opportunities

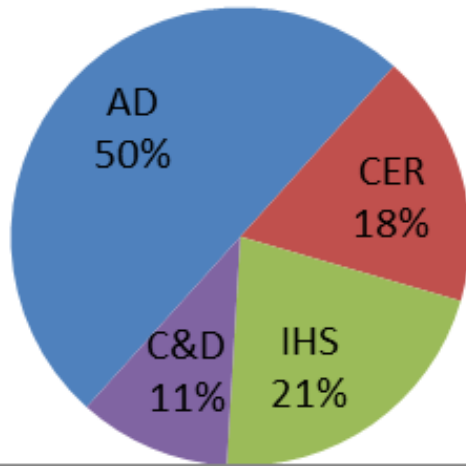
# Classification System of Projects We Have Awarded to Date

- So far, have classified all PCORI approved projects by
  - Disparities focus
  - Shared decision making
  - Age
  - Region
  - Condition
- This is a work in progress and we will continue to classify projects by specific components (e.g., engagement activities, communication tools, etc.)

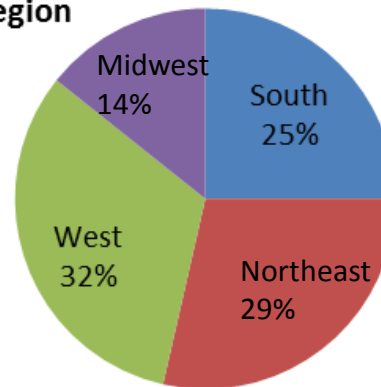
# Addressing Disparities Dashboard

## 28 Total Disparities Projects (14 in AD and 14 across other programs)

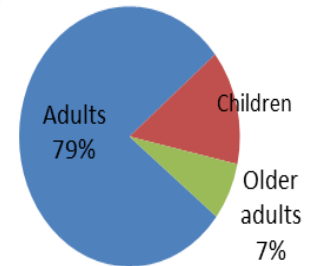
**Disparities Projects By Program Area**



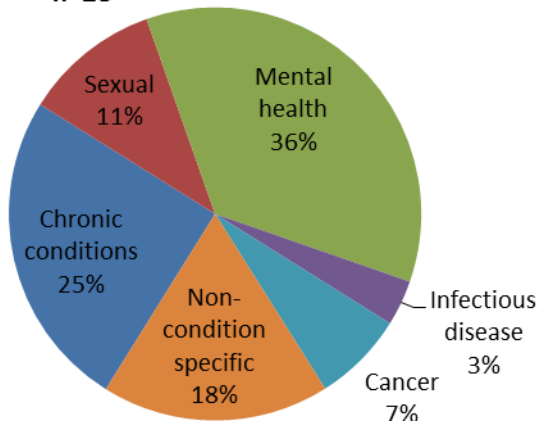
**By Region**



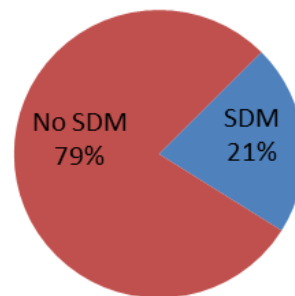
**By Age**



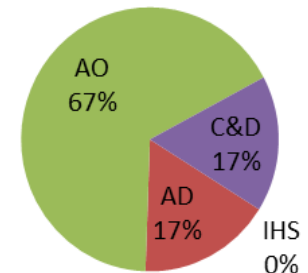
**By Health Topic**  
n=28



**Disparities Projects w/ SDM**  
n=28



**SDM Projects by Program Area**  
n=6



# AD-Related Research Projects Across PCORI (as of 9/10/13)



AD Research Projects



PCORI Research Projects--AD Related



## **Update and Progress on the Ranked Advisory Panel Topics from the April 2013 meeting**

Patient-Centered Outcomes Research Institute








# Ranked topics by the Addressing Disparities Advisory Panel, April 2013

Rank	Short Name	Topic
1	Health communication associated with competing treatments	Compare the effectiveness of clinician/patient health communication models on improving outcomes in minority populations, patients with low literacy and numeracy, people with limited English proficiency, underserved populations, and people with disabilities.
2	Heart attacks among racial and ethnic minorities	Compare the effectiveness of health interventions (including place-based interventions in community health centers) to enhance the “Million Hearts” program and reduce major vascular events among the economically disadvantaged, including racial and ethnic minorities and rural populations.
3	Hypertension in minorities	Compare the effectiveness of different delivery models (e.g., home blood pressure monitors, utilization of pharmacists or other allied health providers) for controlling hypertension in racial minorities.
4	Interventions for improving perinatal outcomes	Compare the effectiveness of multi-level interventions (e.g., community-based, health education, usual care) on reducing disparities in perinatal outcomes.
5	Reduce lower-extremity amputations in minorities	Compare the effectiveness of interventions on reducing disparities in lower-extremity amputations in racial and ethnic minorities.

# Addressing Disparities Program:

## *Update on Priorities Identified by Advisory Panel*

### Topics Recommended

-  **Health communication associated with competing treatments:** Compare the effectiveness of clinician/patient health communication models on improving outcomes in minority populations, patients with low literacy and numeracy, people with limited English proficiency, underserved populations, and people with disabilities.
  -  **Update:** Landscape review is being conducted by America's Essential Hospitals focusing on safety net settings and new delivery models (e.g., ACOs and PCMHs) to identify communication barriers and facilitators in chronic disease management. Review will be completed in early December.
-  **Hypertension in minorities:** Compare the effectiveness of different delivery models (e.g., home blood pressure monitors, utilization of pharmacists or other allied health providers) for controlling hypertension in racial minorities.
  -  **Update:** Topics are being explored and vetted in collaboration with Million Hearts Initiative. Work group tentatively scheduled for October.
-  **Heart attacks among racial & ethnic minorities:** Compare the effectiveness of health interventions (including place-based interventions in community health centers) to enhance the “Million Hearts” program and reduce major vascular events among the economically disadvantaged, including racial and ethnic minorities and rural populations.
  -  **Update:** Landscape review will be completed by December
  -  Collaboration with Million Hearts Initiative underway

# AD Program (cont'd)

## *Update on Priorities Identified by Advisory Panel*

### Topics Recommended

- 🌐 **Interventions for improving perinatal outcomes:** Compare the effectiveness of multi-level interventions (e.g., community-based, health education, usual care) on reducing disparities in perinatal outcomes.
  - 🌐 **Update:** AD program staff conducted initial literature review and explored initiatives undertaken by CMMI in this area.
  - 🌐 Next steps: Tentative workgroup scheduled for October 2013 ( in collaboration with Engagement and Improving Health Systems) and ongoing topic refinement activities.
  
- 🌐 **Reduce lower-extremity amputations in minorities:** Compare the effectiveness of interventions on reducing disparities in lower-extremity amputations in racial and ethnic minorities.
  - 🌐 Preliminary literature review conducted by program staff.
  - 🌐 Program to start topic refinement in January 2014.





## **Update: Targeted Disparities Projects**

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# Treatment Options for African Americans and Hispanics/Latinos with Uncontrolled Asthma

- Focus on reducing adverse outcomes due to poorly controlled asthma in African-American and/or Hispanic/Latino individuals, populations, and subgroups by:
  - Comparing interventions to improve clinician and patient adherence to NHLBI guidelines
  - Incorporating interventions at the community, home, and health system levels and that assess combinations of patient-education tools, home-environment interventions, asthma medications, and team-based approaches
  - Including patient-centered outcomes tailored to the needs of specific individuals and populations

# Update on Asthma PFA

- Released on June 18, 2013
- Applicant Town Hall held on July 9, 2013 with over 125 participants joining
- Letter of intent (LOI) deadline was August 1, 2013 and 108 LOIs were submitted
- Deadline for applications is Wednesday, September 18, 2013
- Up to \$17 million in funds available with awards announced in December 2013

# Obesity Work Group, April 16, 2013

- ~400 questions/comments received for obesity.
- Work group identified 10 top-tier questions under four broad themes:
  - Communication
  - Integration of care
  - Effectiveness of treatment options
  - Behavior
- Need for clinical comparative effectiveness research in this area
- Projects must be completed in three years and have a strong potential to demonstrate reduction in disparities

# Next Steps: Task Force

- Staff performed targeted literature synthesis to confirm research gaps in obesity treatment
- Small Task Force formed to further narrow the topic
  - Kick-off call held July 26, 2013
  - In-person meeting scheduled for October 1, 2013
    - Focus in on one topic
    - Develop details of the potential funding announcement



## **Discussion: Future Research Topics**

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# Topics Raised by Advisory Panel Members

Topic	Submitted by
<b>Mental Health</b>	
Innovative outreach/education to increase utilization of mental health services among minority groups.	Chien-Chi Huang
Mental and behavioral health for racially diverse adolescents.	Alfiee Breland-Noble
Models for improving patient engagement for youth mental health.	Alfiee Breland-Noble
Family engagement in youth mental health treatment uptake.	Alfiee Breland-Noble
Mental health disparities for racial disparity groups (across the socioeconomic spectrum).	Alfiee Breland-Noble
Integration of mental health services into CHCs.	Doriane Miller

# Topics Raised by Advisory Panel Members

Topic	Submitted by
<b>Disability</b>	
Pediatric to adult transition for youth with disabilities.	Mary Ann Sander
Developing hearing apps for testing and amplification. There is a huge gap between those who have hearing loss and those who use hearing aids.	Mary Ann Sander
Providing effective communication for people with disabilities in healthcare setting (could include literacy level, cognitive abilities as well as sensory abilities).	Mary Ann Sander
<b>Other Topics</b>	
The effectiveness of peer support in increasing cancer survivorship among linguistically isolated populations.	Chien-Chi Huang
Interventions for addressing tobacco use in populations with known tobacco disparities.	Tammy Burns
Effective replication of CER for addressing health disparities in rural populations.	Martin Gould
Sleep disparities among Latinos and African Americans due to lack of access to primary care, and environmental factors.	Martina Gallagher
Interventions around health literacy.	Deborah Stewart
Developing effective ways to preserve brain health and function of the 'young old' (60+) as a means of having a healthy and productive aging process.	Mary Ann Sander





## Next Steps

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# Planned January Meeting

- Topics to discuss would include
  - Topic prioritization for future funding announcements
  - Landscape reviews
  - Update on upcoming targeted funding announcements
  - Strategies to enhance dissemination and implementation of findings
  - Portfolio updates for AD program