

Board of Governors Meeting via Teleconference / Webinar

Tuesday, July 18, 2017

12:00 pm – 1:00 pm ET

Board Members Present:

Grayson Norquist, MD, MSPH, *Chairperson*; Debra Barksdale, PhD, RN; Larry Becker; Mike Lauer, MD (designee for Francis Collins, MD, PhD); Allen Douma, MD; Alicia Fernandez, MD; Christine Goertz, DC, PhD; Leah Hole-Marshall, JD; Russell Howerton, MD; Gopal Khanna; Sharon Levine, MD; Freda Lewis-Hall, MD; Ellen Sigal, PhD; Kathleen Troeger, MPH; Robert Zwolak, MD, PhD

Board Members Absent:

Kerry Barnett, JD, *Vice Chairperson*; Gail Hunt; Robert Jesse, MD, PhD; Harlan Krumholz, MD, SM; Richard Kuntz, MD, MSc; Barbara McNeil, MD, PhD

MINUTES

Agenda Item	PCORI Speakers
Call to Order, Roll Call, and Welcome - Grayson Norquist, MD, MSPH, <i>Chairperson</i> and Joe Selby, MD, MPH, <i>Executive Director</i>	Dr. Norquist chaired and opened the meeting; he welcomed all to the meeting of the PCORI Board of Governors. He then read the Chair Statement on Conflict of Interest. Dr. Selby reviewed the agenda for the meeting.
Consider for Approval: Consent Agenda • Minutes of the June 20, 2017 Board Meeting • Revise PEAP Charter - Grayson Norquist, MD, MSPH	Dr. Norquist introduced the Consent Agenda which included the approval of the June 20, 2017 meeting minutes, and approval of the proposed amended Charter for the Advisory Panel on Patient Engagement (PEAP) as recommended by the Engagement, Dissemination and Implementation Committee (EDIC). Dr. Norquist gave the opportunity to Board members to discuss any of the matters on the Consent Agenda. No separate discussion was requested. <i>The following motion was made by Kathleen Troeger and seconded by Russell Howerton:</i> That the Board approve: • Minutes from the June 20, 2017 Board meeting • Proposed amended Charter for the following PCORI Advisory Panel: - Patient Engagement Advisory Panel (PEAP) Motion: Approve each of the Motions on the Consent Agenda <i>Approved by a majority vote of the Board by voice vote (no opposed; no abstentions)</i>
Consider for Approval: Shared Decision Making Implementation Initiative	Debra Barksdale, Chair of the Engagement, Dissemination and Implementation Committee (EDIC) introduced the agenda item, which reflects a recommendation by EDIC

- *Debra Barksdale, PhD, Engagement, Dissemination, and Implementation Committee Chair and Jean Slutsky, PA, MSPH, Chief Engagement and Dissemination Officer*

relating to implementation of effective shared decision making approaches in practice settings. Jean Slutsky then introduced the EDIC's recommendation that the Board approve the development of a PCORI Funding Announcement (PFA) for Shared Decision Making (SDM) Implementation. The PFA would support the targeted implementation and systematic uptake of effective shared decision making strategies in healthcare settings and the rigorous evaluation of those efforts. Ms. Slutsky described the rich evidence demonstrating the effectiveness of shared decision making approaches. Ms. Slutsky also described PCORI's significant research investment in Patient-Centered Outcomes Research related to shared decision making to date, which totals approximately \$164M across 74 research projects.

Ms. Slutsky described several of the application requirements, including that the SDM strategy has been developed with rigor and transparency and in alignment with existing quality standards; that it has demonstrated effectiveness on patient, caregiver and/or healthcare provider decision making; and that it proposes to implement an SDM strategy informing a preference-sensitive decision. She also summarized that the application must include metrics to track impact. She also explained that the initial proposal is that the PFA would be limited to applications that propose to implement a shared decision making strategy that was the focus of a PCORI-funded CER, or that it propose to implement findings from a PCORI-funded CER of a prevention, treatment, or other healthcare intervention using an existing (tested) SDM strategy that can incorporate this evidence.

She informed the Board that the request was for \$6.5M (total costs) in approved funding toward the initial PFA cycle, and for funding for future cycles in amounts not to exceed the Board approved budget for the Dissemination and Implementation program in future cycles offering this PFA. Through the first cycle of this funding announcement, PCORI will fund projects with a maximum budget of \$1.5M direct costs, for up to 3 years.

Following the presentation, the Board discussed the importance of this initiative for employers and employees, the importance of including implementation science expertise in funded projects, and the importance of continuing to work closely with AHRQ on this initiative. It was also recommended to consider the International Patient Decision Aid Standards (IPDAS) when considering the quality of shared decision making approaches proposed for implementation in this PFA. The Board also discussed the

	ways in which the PFA should be limited including whether the PFA should be limited only to applicants from the research teams of the PCORI-funded research teams or have other eligible applicants and whether the proposed projects must implement PCORI-funded research findings. It was clarified that the initial cycle of the PFA will be limited to implementing shared decision making strategies to implement PCORI-funded research findings. It was also clarified that the initial cycle of the PFA will allow applicants to be from the research teams of the PCORI-funded research teams and others who are not from the research teams of the PCORI-funded research teams, as long as such applicants include a letter of support from the Principal Investigator of the PCORI-funded research project. Following the initial PFA cycle, PCORI will evaluate these limitations and consider whether broadening the eligibility is appropriate. <i>The following motion was made by Larry Becker and seconded by Russell Howerton:</i> Motion: Approve the development of a PFA for Implementation of Shared Decision Making in Practice Settings with an initial cycle of \$6.5M (total costs) and additional cycles not to exceed the Board approved budget amounts for the D&I program. <i>Approved by a majority vote of the voting Board members by roll call (14 in favor; 0 opposed; 0 abstentions and 0 recusals) Dr. Zwolak was not present during this vote.</i>
Wrap up and Adjournment - Grayson Norquist, MD, MSPH	Meeting ended at 12:51 pm

Minutes were approved by the PCORI Board of Governors 08-15-2017