



Advisory Panel on Improving Healthcare Systems (IHS) Meeting Summary

Overview

The Advisory Panel on Improving Healthcare Systems (IHS) fall meeting took place from November 9-10, 2015 in the Washington, DC metro area. The panel first discussed the IHS funded portfolio, topic generation and portfolio evaluation, and program strategy updates, then dedicated the remainder of the meeting to discussing four topics under consideration for potential future funding. The topics included “improving quality of life for individuals with dementia,” “interventions to address antimicrobial drug resistance,” “prevention and treatment of adolescents with alcohol abuse issues,” and “discharge from short-term skilled nursing facility.” Through presentations and breakout groups, the goal of the panel was to develop comparative effectiveness research (CER) questions and to make recommendations about the importance of funding research on these topics.

This one-and-a-half-day meeting concluded with a discussion of the re-prioritization of the topics and a discussion of the structure of the meetings to get feedback from the panelists.

The panel was led by IHS Advisory Panel chair Doris Lotz, MD, MPH. The panel is comprised of 20 multi-stakeholder members, 18 of which were in attendance. IHS staff provided input throughout the meeting.

Related Information

- [About This Advisory Panel](#)
- [Meeting Agenda](#)
- [Meeting Slides](#)
- [Topic Briefs](#)
- [Meeting Materials and Archived Teleconference](#)

The Patient-Centered Outcomes Research Institute (PCORI) is an independent organization created to help people make informed healthcare decisions.

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IHS Program and PCORI Updates and Discussion

Steve Clauser, IHS Program Director, welcomed the group and opened the panel with an overview of the current IHS portfolio. Targeted funding initiatives sponsored by the IHS program were specifically highlighted, as they are the largest PCORI-funded studies to date and are addressing some of the most important healthcare issues today—falls in the elderly, care transitions, and hepatitis C virus (HCV), respectively. In addition, the treatment of multiple sclerosis topic, which is currently under development, was highlighted as a PCORI priority and an overview of the PFA was provided to the panel. In discussing PCORI's initiatives from the past year, Clauser specifically discussed the Transitional Care Evidence to Action Network (TC-E2AN) summit, specifically the potential actions and goals associated with the network. Clauser's presentation concluded with a discussion of the panel's future work, including supporting the dissemination of results and the adoption of proven evidence-based models and practices from studies supported by both PCORI and IHS.

Overview of Portfolio/Topic Analysis and Discussion

Rachel Witsaman, MPH, Senior Program Associate, Evaluation & Analysis, presented the Strategic Portfolio Analysis (SPA) for the IHS portfolio. Witsaman began her presentation with an overview of the different areas that the individual projects within the funded portfolio are coded for. She explained that PCORI analyzes and reports on the research we fund to ensure that our portfolio is meeting the needs prioritized by our stakeholders. To accomplish this task, the SPA team collaborated with the Ohio State University to develop a comprehensive taxonomy. In addition to taxonomy, it was explained that a text mining software called IN-SPIRE is used to examine how funded projects align with other organizations' priorities and for comparative clinical effectiveness research.

Witsaman also discussed the process by which topics are captured, coded, and analyzed. PCORI actively solicits topics from patients and other stakeholders through the website and engagement initiatives. In an effort to answer the question of what impact topic capture and research prioritization is making, SPA is analyzing submitted topics for the number and types of topics that PCORI is receiving from different stakeholder groups. This is being accomplished through the use of a set of codes about key topic characteristics and with a web application that uses natural language processing to help track topics. Panelists were also reminded that they can submit topics via the public portal.

Kelly Dunham, MPP, Program Manager, Research Portfolio Development, presented an overview of the topic prioritization pathway. Dunham began her presentation with a breakdown of the two approaches to topic selection: investigator-initiated approach and patient- and other stakeholder-initiated approach. In the investigator-initiated approach, the topics are identified by the research team in the funding application as opposed to the patient-initiated approach where topics come directly from different stakeholder groups. Dunham then went on to discuss the [topic prioritization pathway](#) and the



pathway to a funding announcement. Dunham noted that since 2013, 136 topics have entered the prioritization pathway across 20 distinct therapeutic areas, and 78 topics are under active consideration.

IHS Program Strategy Updates and Discussion

Neeraj Arora, MS, PhD, Senior Program Officer, IHS, provided an update on the IHS Strategic Framework. The main goals of the IHS portfolio are to improve communication about the IHS program and research priorities to a variety of audiences, increase rigor in systems research, and enhance the value of systems research. Another goal is to improve engagement through stronger collaborations across funding agencies and other critical organizations and through a systematic process and criteria for linking and grouping the IHS portfolio.

The IHS program is also striving toward relating the patient journey to the system, research, improvements, and the outcomes by working with patient and caregiver panelists to provide input on the story and the journey. Arora discussed the outcomes of the Strategic Planning Retreat in which a five-year vision was developed to focus on impact, visibility, and support. The panel was very enthusiastic and receptive about participating in the initiative and offered some very valuable feedback as to the strategies that can be implemented.

Breakout Sessions and Formulating CER Questions

Lauren Azar, MHA, Senior Program Associate, IHS, introduced panel members to the following topics: “comparative effectiveness of multicomponent management interventions for individuals with dementia” and “comparative effectiveness of different care coordination strategies designed to transition patients from skilled nursing facilities back into the community” (November 9). The breakout session topics were “comparative effectiveness of alternative interventions to address antimicrobial resistance in hospitals” and “comparative effectiveness of different screening and brief intervention approaches to reduce hazardous drinking among adolescents who abuse alcohol” (November 10). Azar reminded panelists to consider the following objectives when discussing their topics:

- Is the topic well suited for PCORI to fund?
- What specific populations and/or subpopulations would be important to study?
- What interventions should be tested?
- What are some CER questions that are specific to this topic?
- What stakeholder groups would support this?

Topic Discussions and Breakout Sessions

Multicomponent Management Interventions for Community-Dwelling Individuals with Dementia

Timothy P. Daaleman, DO, MPH, Professor and Vice Chair of Family Medicine, University of North Carolina at Chapel Hill, presented the topic on dementia. Multiple interventions have demonstrated efficacy that are specific to patient-centered outcomes; however, PCORI's areas of interest focus on medication management, community-based services, care management, and patient/caregiver education. More targeted research is needed to understand what combination of strategies work best for specific populations from first diagnosis to the end of life.

The breakout groups reported back that while this topic is a major problem, there is a lack of focus and clear direction in addition to an evidence gap that is not clearly defined. There already exists significant funding in this area, and it is unclear as to what PCORI's niche specifically is or if PCORI has a role with this topic. There is ongoing research funded by PCORI that needs to be explored to ensure this is complementary and not duplicative. The recommendation was also made to consider opportunities to leverage PCORnet in this area as well.

Different Care Coordination Strategies Designed to Transition Patients from Skilled Nursing Facilities Back into the Community

Mary Blegen, RN, MA, PhD, FAAN, Professor Emerita, University of California San Francisco, presented the topic on skilled nursing facilities (SNFs). Effectiveness and efficacy data exists on various transitional care strategies; however, more work is needed to understand the relative benefits and harms of such approaches, and to identify practices that promote safety and positive health outcomes for patients, families, and caregivers. There is a need for more research on care coordination strategies that promote discharge of SNF patients and facilitate successful aging in place, improvements in quality of life, and symptom relief. There is limited information on incorporation and efficacy of home health providers in the transition of care.

The breakout groups reported that while the topic is suited for PCORI, it needs to be reframed to focus on the patient issue that can be addressed by a system intervention. PCORI has funded a lot of research on care transition in terms of discharge from the hospital, but there is clear opportunity for patients transitioning from SNFs to home. There were also questions raised about incentives and whether or not PCORI can play a role in this area, and the idea of public reporting was suggested as an incentive.

Alternative Interventions to Address Antimicrobial Resistance in Hospitals

Jim Bellows, PhD, MPH, Managing Director, Kaiser Permanente, presented the topic on antimicrobial resistance. There are five major systematic reviews of the effectiveness of antimicrobial stewardship programs (ASPs) that have been evaluated. However, new research is needed on ASPs that tailor therapy to individualized patients and on studies that estimate the impact of change in prescribing

microbial outcomes. There is also a need for more studies on the implementation, sustainability, scalability, and specific components of interventions that are effective.

The breakout groups reported back that this topic is a major problem in US health care; however, the general consensus was that they do not feel it is ready to tackle in its current formulation. It was also expressed that the likelihood of implementation in practice seems very low, especially in hospitals because it may be more of a hospital-by-hospital problem that cannot be solved with generalizable research. The panel also noted that focusing on antimicrobial resistance in hospital settings may narrow the patient-centered focus and that looking outside to other settings and different social contexts may prove to be more effective. Panelists felt that the CER question needs to be readjusted so that resistance in hospitals is the end-result and the work is directed toward improving the track for patients; however, the current CER question may be better tailored for another department in PCORI besides IHS.

Intervention Models to Reduce Hazardous Drinking among Adolescents Who Abuse Alcohol

Lisa Freeman, Independent Patient Safety Advocate and Consultant, presented the topic on adolescent alcohol abuse. The potential physical, psychological, social, and legal consequences of alcohol abuse make the topic inherently patient-centered as it impacts adolescents, families, and the community. In a meta-analysis review, 200 studies were identified that examined the effects of BIs on alcohol use and abuse; however, only 24 of these studies focused on adolescents. Further research is needed to determine optimal settings, personnel, session frequency, delivery, and modality for better screening and treatment interventions for alcohol abuse.

The breakout groups reported that the greatest misinformation out there is that researchers are not speaking directly to adolescents and that the focus should be on the alcohol piece and taking on a more tailored approach so that the needs of the youth are being directly engaged and addressed in a safe environment. It was also suggested that the focus on alcohol abuse be the starting point, as it usually acts as a gateway to other drugs—and alcohol abuse intervention may prevent future dependencies on other drugs even if it is not directly addressed. The panelists also agreed that this topic would have a high impact due to the increasing numbers of adolescents that abuse alcohol. There is a strong likelihood of implementation and practice because it involves many key stakeholders (schools, counselors, therapists), which is a great opportunity for engagement; however, the issue of whose responsibility it would be to implement was raised.