

The Newsbrief

Center for Management of Complex Chronic Care VA HSR&D Center of Excellence
Spring 2009, Vol. XV No. 1

LIPs Conference

On March 25, 2009 the Center for Management of Complex Chronic Care (CMC3) held their LIPs Conference. LIPs are local initiated projects that are approved and funded by our Center for less than \$10,000 each. They are 6 months in length and can be a pilot project, or an extension of an already existing project. CMC3 investigators, post doctoral fellows and affiliated investigators are eligible to apply. The culmination of these efforts is an annual conference in which results are presented. The expectation is that these projects will lead to submission of large grant applicants and/or manuscripts for publication.

This year's LIPs included a variation of studies related to CMC3's theme of complex chronic care. The projects presented included:

"Coordinating Care in a VA Hospital: Provider Perspectives on Barriers and Facilitators" Timothy Hogan, PhD (post doctoral fellow);

"Evaluation of Major Depression Episode on Continuity of Care and Outcomes in COPD Patients" Todd Lee, PhD;

"Antibiotic Prescribing for Acute Respiratory Infection and Subsequent Outpatient and Hospital Utilization in Veterans with Spinal Cord Injury and Disorder" Charlesnika Evans, PhD;

"An Evaluation of the Literature on Nosocomial and Latrogenic Acquisition of Hepatitis C Virus (HCV): Is it possible in Veterans?" June McKoy, MD for Charles Bennett, MD;

"Overlooking Contextual Information in Medical Decision Making: A Source of Medical Error and Avoidable Cost" Saul Weiner, MD;

"Families of Traumatic Brain Injured Soldiers: Experience of Caregiving" Karen Saban, PhD, RN (post doctoral fellow);

"Accuracy of Diagnostic Coding of Lower Extremity Ulcer" Elly Budiman-Mak, MD;

"Standardization in the JBVA ER Chest Pain Unit" Betty Hockenberry, NP, PhD for Chad Kessler, MD;

"MOVE! Talk System to Mobilize VA Obesity Treatment" Amy Janke, PhD and Bonnie Spring, PhD.

More information on these LIPs is available by contacting the Center at 708-202-2414, or the PI of each study on Outlook.

Someone You Should Meet: Elizabeth Tarlov, PhD, RN

Dr. Tarlov is a nurse and health researcher. She joined the Center for Management of Complex Chronic Care (CMC3) in 2009. She is also Assistant Director of the VA Information Resource Center (VIREC), a VA HSR&D Service Resource Center based at the Edward Hines Jr., VA Hospital. Dr. Tarlov received her PhD in 2004 from the University of Illinois at Chicago School of Public Health in Health Policy and Administration. She also completed a VA HSR&D postdoctoral fellowship at CMC3 in 2006. Prior to embarking on a research career, Dr. Tarlov worked for many years in community health as a family nurse practitioner. In that role she worked in rural, suburban, and inner city settings and observed that the average health status of her patients varied markedly from one location to another. This led her to an interest in the social determinants of health and, ultimately, to redirect her efforts toward research as a tool to achieve community health improvement.

Dr. Tarlov's principal research interests are in understanding pathways between social factors and health. Her dissertation research examined shifts over time in the relationship between educational attainment and cancer mortality. She and colleagues from UIC studied relationships between neighborhood and health including characteristics of mammography facility locations and breast cancer stage at diagnosis. As Co-Investigator on a VA study examining colon cancer care among veterans dually eligible for VA and Medicare-covered healthcare, she has focused on analyses of age and race/ethnic disparities in adjuvant chemotherapy use in VA and non-VA settings. Dr. Tarlov is also interested in methodological and data quality issues related to the use of large databases for research and is co-lead with Dr. Kevin Stroupe of VIREC's data quality research initiative

New HSR&D Study Funded, "Intervening to Prevent Contextual Errors in Medical Decision Making" PI – Saul J. Weiner, MD

Dr. Weiner and colleagues have been interested in identifying, predicting, and now intervening to prevent medical errors that are caused by failures to take into account patients' context when planning their care. The failure, for instance, to recognize that a patient is not able to take a medication correctly (e.g. because of cognitive disabilities or cost) may have as deleterious consequences as the failure to prescribe the correct medicine. Most efforts at error prevention have focused on the latter, few on the former. Preventing these "contextual errors" requires attention to contextual factors specific to each patient's life situation and relevant to their care.

Dr. Weiner's upcoming HSRD funded study, "Intervening to Prevent Contextual Errors in Medical Decision Making" will test a curriculum that he and colleagues developed with funding from the National Board of Medical Examiners to train physicians to systematically incorporate contextual factors into the process of planning patient care. The project will enroll 144 residents at Hines and Jesse Brown VA Medical Centers, half of whom will participate in the curriculum. Both those in the intervention and control will then proceed through 3 levels of evaluation designed to test the efficacy of the curriculum. The first consists of a standardized patient assessment. The second two will enlist the physicians' real patients to assist with the measurement process. Real patients will audio record their visits. A chart review and coding process of the audio recordings will be applied to measure prospectively the extent to which contextual issues are identified and addressed when essential to providing appropriate care.

New Funding at CMC3 for Bridget Smith, PhD

Dr. Bridget Smith (PI) and Dr. Charlesnika Evans (co-PI) recently received approval from VA HSR&D for the project, "Evaluation of TBI Screening Processes and Healthcare Utilization." This project responded to a special solicitation from VA HSR&D to evaluate the VA traumatic brain injury (TBI) Screening instruments and processes for clinical follow-up. This study will

involve several CMC3 investigators and a clinical team of experts in TBI. The aims are to examine factors associated with receipt of the TBI clinical reminder (CR) and the association between the results of the TBI CR, veteran characteristics, and subsequent VA health care utilization and costs.

The VA HSR&D study, "Health Care Utilization and Costs for Veterans with Neurotrauma" (Dr. Smith, PI, and Dr. Stroupe, Co-PI) has also recently been approved. The objectives of this two-year study are to (1) describe health care use and costs of VA, Medicare and Medicaid covered services by veterans with neurotrauma; (2) examine the association of patient characteristics, multiple health care system use, and fragmentation of care with health outcomes including hospitalization and mortality (all-cause and for frequent complications of neurotrauma); and to (3) characterize the patterns of health care use and costs of veterans with neurotrauma who obtained their injuries during OEF/OIF and to compare those patterns to those of other veterans with neurotrauma.

Recently Funded Studies of SCI QUERI

Dr. Evans also has a newly funded QUERI Rapid Response Project (RRP) entitled "Development and testing of MRSA educational materials for SCI veterans." The goal of this study is to develop Methicillin-resistant Staphylococcus aureus (MRSA) educational materials for patients with spinal cord injury or disorder (SCI/D) and caregivers and test their effect on knowledge and behavior using a randomized control trial design. MRSA is a frequent cause of infection in the U.S. and a significant cause of infection in persons with SCI/D. The VA has released policies for acute care and the SCI Centers focused on infection control strategies to prevent the spread of MRSA. Along with the directive, educational materials for MRSA testing, treatment, and prevention were developed by VA Office of Patient Care Services and made available on their prevention website. However, specific educational materials are still lacking for the SCI/D population. Materials developed for the general VA population do not address the unique challenges that face veterans with SCI/D. The educational materials developed and lessons learned from this study will be used in a larger implementation initiative to reduce MRSA infections in this population.

Dr Timothy Hogan has a newly funded RRP entitled, "Promoting Implementation of My HealtheVet among Veterans with SCI/D." Through the hosting of information and other tools, VA's new personal health record system, My HealtheVet (MHV), offers a means to support healthy behaviors and health care access among veterans with spinal cord injuries and disorders (SCI/D). However, despite this potential, little is presently known about the levels of awareness and use that exist among VA SCI/D healthcare providers and veterans with SCI/D when it comes to MHV, or what, if any, attempts are being made to promote use of the MHV system. This project utilizes a two-phase, mixed-methods approach incorporating quantitative and qualitative data to promote and assess use of the MHV system among veterans with SCI/D and their healthcare providers at two VA SCI/D Centers. This RRP represents a critical next step in SCI QUERI's ongoing efforts to develop MHV as an effective self-management and shared-decision making tool for veterans with SCI/D.

Fran Weaver, PhD Presents at VA Research Week Activities in Washington, DC

Dr. Fran Weaver, Director of CMC3, and co-PI of CSP 468 presented the six month findings from, "A Comparison of Best Medical Therapy and Deep Brain Stimulation of Subthalamic Nucleus and Globus Pallidus for the Treatment of Parkinson's Disease" at the VA Research Week Activities on April 30, 2009. The theme of this year's meeting was

'VA Research: Turning Hope into Reality." She was a participant in a panel in the segment called "What is Best for my Patient? VA Comparative Effectiveness Research."

This study has received significant press attention since the study was published in the Journal of the American Medical Association (JAMA.2009 Jan 7;301(1):63-73). The primary finding of this study was that deep brain stimulation was superior to best medical therapy in improving motor function and quality of life outcomes in patients with advanced Parkinson's disease. However, these gains were accompanied by greater risk of serious adverse events.

Veena Shankaran, MD Post Resident Fellow, Receives 2009 ASCO Cancer Foundation Award

Veena Shankaran, MD, HSR&D Post Resident Fellow of the Center for Management of Complex Chronic Care (CMC3) COE received the Young Investigator Award (YIA) for 2009 from the ASCO Cancer Foundation.

The YIA is in the amount of \$50,000 for her research titled, "The Out-of-Pocket Costs and Burden for Medicare-Eligible Cancer Patients and their Caregivers." Dr Shankaran's mentors are: Dr. Charles Bennett, and Dr. Todd Lee.

The Susan G. Komen for the Cure® will be funding her award as part of the Susan G. Komen for the Cure/ASCO Cancer Foundation Research Initiative. The grant period commences July 1, 2009 and concludes June 30, 2010.

Dr. Shankaran, a guest and one mentor will receive an invitation to the Awards Ceremony which is scheduled during the Annual Meeting in Orlando to honor all award recipients.

Research Day, A Very Successful Event

Hines VA Hospital R&D Service hosted Research Day 2009 on Wednesday, May 6, 2009. Over 70 posters were presented by representatives from the participating institutions: Hines VAH, North Chicago VAMC, Loyola University Medical Center, Rosalind Franklin University, and the Great Lakes Naval Institute for Dental and Biomedical Research. Many CMC3 investigators presented their work.

The day included oral presentations by researchers of the host institution. Among the presentations were: "Deep Brain Stimulation vs. Best Medical Therapy for Parkinson's Disease: Results of a Multi-Site Randomized Trial," (F.M. Weaver) and "Data from Research That Addresses the Outcomes Associated with Respiratory Complications in Veterans with Spinal Cord Injuries and Disorders." (B. Smith)

Editorial Credits

EDITORIAL DIRECTOR- Frances Weaver, PhD
EDITORIAL ASSISTANT- Carol Durczak

TECHNICAL DIRECTOR- Saul J. Weiner, MD
DESIGN/LAYOUT- Madeline Thornton

Contributions or Suggestions should be addressed to:
Madeline Thornton
c/o HSR&D (151H)
P.O. Box 5000
Hines VA Hospital
Hines, IL 60141-5151
e mail- Madeline.Thornton@va.gov