Dashboard Review
First Quarter of FY-2017

Joe Selby, MD, MPH
Executive Director
Goal One
Increasing Information
Use of a decision aid in patients with low risk chest pain increased understanding of risk and safely decreased the rate of admission to an observation unit for cardiac testing.

Goal Two
Speeding Implementation
We awarded one of our first D&I projects to a PCORI-funded study on preventing non-administration of VTE prophylaxis to implement the intervention in two large hospital settings.

Goal Three
Influencing Research
PCORI is credited as a model for Henry Ford Health System’s Patient Engagement Research Center (PERC), which brings together researchers and patient advisory groups to improve patient care.
Chest pain is the second most common reason patients visit emergency departments across the United States. To avoid missing a heart attack diagnosis, doctors frequently admit patients to the hospital even when they are at very low risk. These low-risk admissions result in unnecessary testing, patient anxiety, and disruption in patients’ lives, as well as increased healthcare costs.

This study compared the effectiveness of shared decision making vs. usual care in choice of admission for observation and further cardiac testing or for referral for outpatient evaluation in patients with low risk chest pain. Use of the decision aid increased patient knowledge about their risk, increased engagement, and safely decreased the rate of admission to an observation unit for cardiac testing.


Results (Abstract): Compared with usual care, patients using the decision aid had greater knowledge of their risk for acute coronary syndrome and options for care (questions correct: decision aid, 4.2 v usual care, 3.6; mean difference 0.66, 95% CI 0.46 to 0.86), were more involved in the decision (observing patient involvement scores: decision aid, 18.3 v usual care, 7.9; 10.3, 9.1 to 11.5), and less frequently decided with their clinician to be admitted for cardiac testing (decision aid, 37% v usual care, 52%; absolute difference 15%; P<0.001). There were no major adverse cardiac events due to the intervention.

• Awarded 2012, Assessment of Prevention, Diagnosis, and Treatment Options project
• Principal Investigator: Erik Paul Hess, MD, MS, Mayo Clinic

Patients can be effectively educated and engaged in the emergency care setting in decisions about testing and follow-up... it is feasible to do so in the flow of clinical care.
Dissemination of Results:
D&I Project for Preventing Venous Thromboembolism (VTE)

AHRQ has called VTE prevention in patients the number one strategy to improve patient safety in hospitals. A PCORI-funded study found that patients want to be educated on VTE, and that educating bedside nurses and implementing a patient-centered education intervention led to significant reduction in non-administration of VTE prophylaxis.

PCORI Dissemination Project:

This project aims to scale up the implementation of a patient-centered VTE prevention education intervention in 2 settings:

1. To all floors of the large, academic teaching hospital where the intervention was originally tested (Johns Hopkins)
2. To all floors of a medium-sized community, suburban, non-teaching hospital

The goal is to decrease refused doses of VTE prophylaxis among inpatients within these two hospitals. If successful, this D&I project will result in improved quality of patient-nurse communication and more informed patient decisions regarding the choice to take VTE pharmacologic prophylaxis.
D&I PFA - Limited Competition
LOIs, Applications, and Awards (All Cycles)

Cycle dates = dates that awards were announced
Some LOIs not accepted due to administrative noncompliance

Competitive LOI beginning 2017

- Letters of Intent Submitted
- Letters of Intent Accepted
- Applications
- Awards
- LOI Acceptance Rate

100% 100% 86%
Influence Example:
PCORI Credited with Serving as a Model for Patient Engagement in Research at Henry Ford Health System

PCORI is credited with serving as a model for patient engagement at Henry Ford Health System Patient Engagement Research Center (PERC), which was created to develop the infrastructure for patient-centered outcomes research at Henry Ford Health System and improve the way Henry Ford delivers patient care and treatment of diseases. An AHRQ grant was awarded in 2013.

Goal: Henry Ford’s flexible engagement model facilitates meaningful dialog between patients, caregivers, physicians and researchers to address topics that matter to all.

Results of the PERC include:

- Educating and engaging stakeholders through:
  - Creation of a diverse Patient Advisor group (~300 currently enrolled)
  - Building Patient Advisors skills to collaborate as full members of research teams.
  - Implemented an education module to prepare researchers for effective engagement

- Expanding dedicated resources for 4 research function cores:
  - Patient Engagement
  - Study Design, Analysis and Measurement
  - Patient Data Network
  - Dissemination and Implementation

"PCORI's support, resources and guidance have been key to PERC’s success, particularly PCORI website resources, and monthly guidance from the Pipeline to Proposal team– Karen Kippen"
Influence on Research: Uptake of the PCORI Engagement Rubric

PCORI Engagement Rubric
CME/CE Activity released Jan 2016

Unique Accesses By Quarter (N=1862)

CME/CE Certificates* By Quarter (N=454)

Cumulative CME/CE Learners By Profession (N=707)

- Nurse: 193
- Physician: 129
- Pharmacist: 109
- Nurse Practitioner: 92
- Case Manager: 55
- Physician Assistant: 33
- Medical Assistant: 22
- Psychologist: 11
- Health Educ. Specialist: 10
- 53 Other or Unknown

*Some learners earn multiple certificates, while many do not require certificates and access the course without seeking CME/CE.
We actively monitor our projects, support them to be successful, and classify their progress as shown below.

<table>
<thead>
<tr>
<th><strong>GREEN</strong></th>
<th><strong>YELLOW</strong></th>
<th><strong>ORANGE</strong></th>
<th><strong>RED</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>The Project is meeting &gt;85% of milestones on time</td>
<td>Project does not meet all criteria for “Green”</td>
<td>Project does not meet all criteria for “Orange”</td>
<td>Project does not meet all criteria for “Red”</td>
</tr>
<tr>
<td>-AND-</td>
<td>-AND-</td>
<td>-AND-</td>
<td></td>
</tr>
<tr>
<td>Recruitment occurring on schedule, at expected rate</td>
<td>Project is meeting &gt;65% of milestones on time.</td>
<td>Project is meeting &gt;50% of milestones on time.</td>
<td>Project is meeting &lt;50% of milestones on time.</td>
</tr>
<tr>
<td>-AND-</td>
<td>-OR-</td>
<td>-OR-</td>
<td></td>
</tr>
<tr>
<td>Recruitment is ≤75% and &gt;50% of target accrual</td>
<td>Recruitment is ≤50% of target accrual</td>
<td>Recruitment is persistently and significantly ≤50% of target</td>
<td></td>
</tr>
<tr>
<td>-OR-</td>
<td>-OR-</td>
<td>-OR-</td>
<td></td>
</tr>
<tr>
<td>PO judges that the project has a high probability of meeting its objectives as planned. PO judgment is based on close review of study progress, including recruitment status.</td>
<td>PO has concerns that without remediation efforts the project will not be able to meet objectives within project period.</td>
<td>PO has concerns that the project will not meet objectives within the approved project period. Modifications to the Milestone Schedule and/or project plan are likely required.</td>
<td>PO has significant concerns that the project cannot meet its original objectives. Major modifications to Milestone Schedule are required for the project to be completed.</td>
</tr>
</tbody>
</table>

**Next Steps**
- **Continue monitoring** project through active portfolio management and per SOPs.
- **Increased communication** with the PI to monitor and assist with getting the project back on track.
- **Placed Under Review** at PCORI to determine if it is able to meet its original project plan.
- **Pursue modifications** to project plan or milestone schedule as appropriate.
- **Project Remediation Plan (PRP)** memo sent to PI with a 30-day completion date deadline.
- **Inform Leadership of Status**
We are monitoring trends and shifts in project status

Project Status by Color Zones
Q3-15 to Q1-17

We are monitoring trends and shifts in project status

*Notice of Termination Issued, <1% in each quarter
Projects On Track
Subset of Projects in the Yellow Zone

On Track, but Yellow Zone: Details
(Among All Projects Eligible for Color Evaluation)

- % of Projects in the Yellow Zone
- % First Time in Yellow Zone
- % Consecutively in Yellow Zone (4+ quarters)
- % in Yellow Zone that improved from Red or Orange within past year

Q2-16 (N=326)
Q3-16 (N=335)
Q4-16 (N=367)
Q1-17 (N=383)
Projects Off Track
Subset of Projects in the Orange or Red Zone

Percent of Projects Off Track: Details
(Among All Projects Eligible for Color Evaluation)

- Q2-16 (N=326)
- Q3-16 (N=335)
- Q4-16 (N=367)
- Q1-17 (N=383)
DFRR Submission
Based on DFRR Due Date in Contract

Timeliness of Q1-17 DFRR Submission
From Due Date to Submission
N=23

- Early, 4
- On Time, 15
- Late, 2
- Not Yet Turned In, 2

Target: 90% in on time
Q1-17: 82% in on time

How early or late were the Q1-17 DFRRs?

On Time, N=15
Late, N=2
Early, N=4
Not Yet Turned In, N=2

Needs Board Attention
On Target
Off Target
Too Early to Evaluate

Target: 90% in on time
Q1-17: 82% in on time
Out of the 39 articles resulting from PCORI-funded projects in Q1-17, 26 were empirical results, and 6 of those were CER results.

*Note: Current quarter counts can be artificially low because some articles are not indexed right away*
# High Altmetric Scores

## PCORI Funded Publications from Q1-17

These 4 publications from Q1-17 have high Altmetric scores, indicating attention in news articles (red), on social media (blues), and in blogs (gold).

<table>
<thead>
<tr>
<th>Altmetric</th>
<th>Publication</th>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>616</td>
<td>Bryant-Stephens T, et al. <strong>Home Visits are Needed to Address Asthma Health Disparities in Adults.</strong> <em>J Allergy Clin Immunol.</em> 2016 Oct 21. pii: S0091-6749(16)31218-0. (<a href="https://www.jacionline.org/article/S0091-6749(16)31218-0/fulltext">link</a>)</td>
<td><strong>Perspective:</strong> Explores barriers to reducing asthma morbidity and mortality in low-income and minority patients. Researchers conclude that in-home visits are necessary for understanding SES barriers to decrease mortality and morbidity of asthma.</td>
</tr>
<tr>
<td>212</td>
<td>Shah SS, Srivastava R, Keren R, Wu S, et al. <strong>Intravenous Versus Oral Antibiotics for Postdischarge Treatment of Complicated Pneumonia.</strong> <em>Pediatrics.</em> 2016; December 138(6):e20161692 (<a href="https://pediatrics.aappublications.org/content/138/6/e20161692">link</a>)</td>
<td><strong>CER Results:</strong> Compares the effectiveness of oral and intravenous (PICC) antibiotic treatment for complicated pneumonia in children. The study found no increased efficacy of PICC compared to oral antibiotics, but higher levels of complications and adverse reactions with PICC.</td>
</tr>
<tr>
<td>205</td>
<td>Hess EP, et al. <strong>Shared decision making in patients with low risk chest pain: prospective randomized pragmatic trial.</strong> <em>BMJ.</em> 2016 Dec 5;355:i6165. (<a href="https://bmj.com/content/355/bmj.i6165">link</a>)</td>
<td><strong>CER Results:</strong> Compares usual care to decision aid (patient actively engages in decision-making process) and found that, using the decision aid, patients at low risk for coronary syndrome safely decreased the rate of admission to an observation unit for testing.</td>
</tr>
<tr>
<td>149</td>
<td>Martin MA, et al. <strong>Care transition interventions for children with asthma in the emergency department.</strong> <em>J Allergy Clin Immunol.</em> 2016 Dec;138(6):1518-1525. (<a href="https://www.jacionline.org/article/S0091-6749(16)31218-0/fulltext">link</a>)</td>
<td><strong>Review:</strong> Investigates ED care transition interventions for children. Evidence to date suggests that ED care transition interventions should consider expanding beyond the ED to bridge the multiple sectors children with asthma navigate, including health care settings, homes, schools, and community spaces.</td>
</tr>
</tbody>
</table>
PCORnet

Designated Research Projects

As of Q1-2017, there are 19 PCORnet Designated research projects underway. The target for 2017 is 24 Designated studies underway, including 4 externally-funded or co-funded studies.

PCORnet-Designated Research Projects Underway (Cumulative)

2017 Target:
24 Studies Underway, 4 Externally Funded or Co-funded

*PCORI-Funded: includes designated PCORnet Demonstration projects and PCORI projects that use PCORnet
PCORnet
Designated Research Projects

First Externally-Funded PCORnet-Designated Study – the INVESTED Trial

A comparative effectiveness study of doses of *influenza vaccine among patients with a history of myocardial infarction or heart failure*. Funded by the NIH, this study seeks to enroll and randomize 9,300 patients, and will leverage 7 Clinical Data Research Networks (CDRNs). (NCT02787044)
### Engagement Awards

#### Q1-17 Update

**Engagement Awards**

<table>
<thead>
<tr>
<th>Cycle</th>
<th>LOIs Received</th>
<th>Applications</th>
<th>Awards</th>
<th>Not Yet Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cycle 1 (2014)</td>
<td>27</td>
<td>22</td>
<td>18</td>
<td>7</td>
</tr>
<tr>
<td>Cycle 3 (2015)</td>
<td>110</td>
<td>67</td>
<td>21</td>
<td>18</td>
</tr>
<tr>
<td>Cycle 4 (2015)</td>
<td>110</td>
<td>110</td>
<td>17</td>
<td>12</td>
</tr>
<tr>
<td>Cycle 6 (2015)</td>
<td>95</td>
<td>95</td>
<td>24</td>
<td>16</td>
</tr>
<tr>
<td>Cycle 7 (2016)</td>
<td>95</td>
<td>95</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>Cycle 8 (2016)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Meeting/Conference Support**

<table>
<thead>
<tr>
<th>Cycle</th>
<th>Applications</th>
<th>Awards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cycle 1 (2014)</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>Cycle 2 (2015)</td>
<td>29</td>
<td>12</td>
</tr>
<tr>
<td>Cycle 3 (2015)</td>
<td>24</td>
<td>9</td>
</tr>
<tr>
<td>Cycle 4 (2015)</td>
<td>38</td>
<td>17</td>
</tr>
<tr>
<td>Cycle 5 (2015)</td>
<td>24</td>
<td>14</td>
</tr>
<tr>
<td>Cycle 6 (2016)</td>
<td>39</td>
<td>16</td>
</tr>
<tr>
<td>Cycle 7 (2016)</td>
<td>47</td>
<td>18</td>
</tr>
<tr>
<td>Cycle 8 (2016)</td>
<td>19</td>
<td>8</td>
</tr>
</tbody>
</table>