NURTURING PARTNERSHIPS IN RESEARCH,
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#### AHRQ Centers for Primary Care Practice-Based Research and Learning (P30 Grants)

The AHRQ Centers for Primary Care Practice-Based Research and Learning nurture partnerships, conduct research, and disseminate knowledge with the ultimate aim of improving patient care. By connecting several Practice-Based Research Networks

(PBRNs) and other research partners under a single Center it is possible to engage in sophisticated projects in a collaborative environment.

This summary is an invitation to learn about the Center's research areas of interest, experts, and strategies for enhancing primary care. We hope the information fosters pursuits of

The <u>Collaborative Ohio Inquiry Network's (COIN's)</u> mission is to **develop** the capacity of PBRNs, to **do** practice-based research by stimulating and fostering research collaborations, and to **disseminate** research findings by effectively sharing knowledge and translating research into practice. Research capacity is developed by engaging and recruiting practices, identifying and collaborating with investigators, and training network members and academics in PBRN methods.

The COIN Center comprises 12 PBRNs affiliated with the Clinical and Translational Science Award (CTSA) Centers at Case Western Reserve University, Ohio State University, and the University of Cincinnati, and coordinates work through the PBRN infrastructure at the Northeast Ohio Medical University (NEOMED). COIN also partners with Ohio's health information exchanges and regional health care improvement collaboratives to develop health information technology (IT) and quality improvement research capacity. COIN's work is organized around a Research, Dissemination, and Training Core and an Administrative and Regulatory Core, which provide a framework for planning, responding to funding opportunities, updating members, and discussing new initiatives.







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### Partnerships & Collaborations:

#### Collaborations with HIE and REC

COIN established a working relationship with leaders of Ohio's Health Information Exchanges (HIEs) and Regional Extension Centers (RECs). The groups have worked together to develop an R18 grant application and partnered on an expert panel examining the connection of PBRNs to HIEs and RECs at the Ohio Practice-Based Research Festival. This relationship enables COIN investigators to stay abreast of the needs of practices in adopting health IT and meaningful use requirements and to partner on health IT—related funding opportunities.

### Reliant IRB Review and the COIN Pilot Study

The three Ohio CTSA sites and COIN collaborated to develop a more effective and efficient investigational review board

(IRB) review of multicenter clinical research studies. The Ohio Reliant IRB was broadly designed to reduce the amount of time required for IRB reviews and to allow clinical investigators to collaborate across institutions by having partnering IRBs rely on the review of one. In 2013, COIN launched a PBRN MicroGrant program to support the development of preliminary study data useful for strengthening grant applications. The highest-rated and -funded proposal from the program was submitted by the Central Ohio Practice Based Research Network (COPBRN) at Ohio State University (OSU), Assessing Primary Care Practice Transformation across Primary Care Practices in a Collaborative of PBRNs. The study protocol was one of the first to go through

"The MicroGrant program produces friendly competition and elicits our most innovative ideas for collaborative research."

Jim Werner, PhD, MSSA Director, COIN

Reliant IRB review and served as a test for the Center, as most COIN investigators were not experienced with the new review system. COIN investigators feel the Reliant IRB system is a benefit and critical to securing partnerships with researchers across the State, streamlining complex approval procedures, and performing sophisticated research.

A <u>Webinar focusing on various types of IRB cooperation</u> that can be pursued to support practice-based research was hosted by AHRQ in September 2014. Processes for participating in Ohio's Reliant IRB review, ceding review to a lead IRB, and serving as the IRB of record were described. Amanda Ross from COIN presented along with three representatives from the Meta-LARC P30: Jeanette M. Daly, Iowa Research Network (IRENE); Tabria Winer, Shared Network of Collaborative Ambulatory Practices & Partners (SNOCAP); and LeAnn Michaels, Oregon Rural Practice-based Research Network (ORPRN).

### **Training & Education:**

### **Learning Collaborative**

COIN partners at Case Western Reserve University, NEOMED/Northeastern Ohio Network (NEON), and the Safety Net Providers' Strategic Alliance (SNPSA) developed a learning collaborative focused on integrated primary care behavioral health. The collaborative seeks to improve translation of clinical and policy research findings into practice and to identify best practices for integrated care. The opportunity to participate will be extended to other COIN sites if it proves to be effective in disseminating best practices, developing capacity to conduct translational research, and developing the capacity of practices to provide high-quality, integrated health care services.





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#### Ohio Practice-Based Research Festival 2.0

The 2013 Ohio Practice-Based Research Festival 2.0: The Growing Intersection of Primary Care and Public Health, organized by COIN members, convened more than 80 clinicians, academics, practice staff, and patient volunteers from COIN PBRNs. The goal was to educate and provide perspectives on translational research opportunities at the primary care—public health interface. Since the festival, COIN continues to serve as a training ground and facilitate infrastructure development between the primary care and public health sectors. Activities include mentoring junior investigators for career and PBRN development at NEOMED and OSU, and developing an internal medicine PBRN in Columbus, OH, which is collaborating with NEON to incorporate public health resources.

# <u>Training workshops from COIN members on research methods and engaging practices</u> in 'moving the needle' on major public health topics:

- Timothy Huerta, PhD COPBRN, Evaluating Efficiency & Quality in Practice and Best Practices in Digital Social Media
- Nancy Elder, MD, MSPH, and Saundra Regan, PhD CARInG Network, Qualitative Methods for Community & Practice-Based Research
- Susan Labuda-Schrop, PhD, and Rebecca Fischbein, PhD NEON, Lessons in the Development of a Residency-Based Research Network
- Kelly Burgess, MPA CWRU PBRN Shared Resource, Methods for Social Network Analysis and Application to PBRNs
- Sharon Meropol, MD, PhD RRN and Bill Brinkman, MD CPRG, Best Practices in Pediatric Practice-Based Research Networks

### **Quality Improvement: Peer Support and Mentoring:**

COIN members partnered to develop a Maintenance of Certification Part IV (MOC) Peer Support Collaborative that aids participating physicians in executing the MOC-required practice assessment and improvement project. Specifically, the Center gives guidance on how to: (1) choose, plan, and implement a practice improvement project; (2) exchange peer consultation with other physicians and practices; (3) take advantage of the assistance and innovative resources offered by the MOC4 Project Team. Participating physicians also have the opportunity to learn about practice-based research and the PBRN Shared Resource and to become a member if they are interested. The collaborative focuses on mentoring, a

"The P30 Center structure encourages partnerships that are mutually beneficial and build long-term, equitable, trusting relationships. PBRNs are perfectly positioned to do this work."

Jim Werner, PhD, MSSA Director, COIN

cornerstone of COIN's mission, and has been a benefit to the network as an effective way to engage and partner with new practices. The collaborative is led by Dr. Kurt Stange, director of Research Association of Practices (RAP), a COIN member PBRN.





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## For more information on Maintenance of Certification, the Peer Support Collaborative, and Mentoring:

<u>Engagement of Groups in Family Medicine Board Maintenance</u> of Certification

Webinar on Preparing a New Generation of PBRN Leaders; co-presented by COIN director James Werner and Jonathan Tobin (N<sup>2</sup> PBRN P30).

Webinar on Contextual Relevancy and Research
Collaborations, PBRNs Foster Partnerships for Pragmatic,
Prompt Resolutions; co-presented by Larry Green (University of Colorado), COIN director James Werner, and Rebecca Etz (Virginia Commonwealth University Medical Center)

#### What is the PBRN Shared Resource?

The <u>PBRN Shared Resource</u> facilitates collaborations among primary care practices, communities, and academic investigators and aims to generate and answer questions relevant to everyday practice. Team members specialize in forging partnerships that promote the translation of research into practice and emphasize the importance of practice-informed research. It is supported through the <u>Cleveland</u> Clinical and Translational Science Collaborative.

### **Getting to Know COIN's Key Personnel**

Jim Werner, PhD, MSSA Director, COIN

"By bringing together the Practice-Based Research Networks in Ohio, the COIN Center has created a critical mass for doing impactful research. The infrastructure resources provided by The Agency for Healthcare Research and Quality and our partner Clinical and Translational Science Award Centers create a platform for collaborative research that is unlike anything we've had before. Looking to the future, COIN's networks will be partnering for more innovative research and quality improvement and will build long-range PBRN capacity through research training programs."

## Nancy Elder, MD, MSPH Director, CaRinG Network

"Working together in COIN has been an excellent boost to the quality of our research. The networking opportunities and access to expertise from COIN members has helped researchers affiliated with our local PBRN (Cincinnati Area Research and Improvement Group) successfully compete for over 1 million dollars in foundation grants since 2013. We also network on a smaller scale across PBRNs and academic health centers on topics such as end-of-life care, chronic pain, and PCMH transformation. I think COIN will continue to grow in the coming years, which will allow us to better study areas of importance for Ohio and the region."

### Randy Wexler, MD, MPH, FAAFP Clinical Research Director, COPBRN

"Engagement with COIN has benefited the COPBRN in many ways. It has provide a forum for new investigators to find and be mentored by those with similar interests, as well as serve as an internal review committee for upcoming grant submissions. Looking to the future, COIN will allow for research that produces more generalizable results, thereby enhancing the importance of the research we undertake."





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### What is next for COIN?

COIN is dedicated to developing connections with public health and health care IT communities and supporting PBRN infrastructure development to encourage translational research in community-based practice settings.

#### COIN will work to disseminate findings from two projects:

- The COIN Pilot Study: Huerta TR (Principal Investigator), Hefner JL, Sieck CJ, McAlearney AS. Assessing
  Primary Care Practice Transformation Across Primary Care Practices in a Collaborative of Practice-Based
  Research Networks (PBRNs). Collaborative Ohio Inquiry Network (COIN) MicroGrant. CTSA Shared Resources
  Competitive Grant. October 2013–July 2014.
- 2. The replication of the <u>PBRN-Clinical and Translational Science Award Community Partnership Core national survey</u> conducted in collaboration with another <u>PBRN Center for Primary Care Practice-Based Research and Learning</u>, Meta-LARC.

#### Other efforts include:

- The Ohio Clinical Trials Collaborative (OCTC) is an infrastructure-building project developed by Ohio's 3 CTSAs and the state of Ohio. Through OCTC, COIN is building the capacity to conduct Phase 3 & 4 clinical drug and device trials in its PBRNs. This effort is bringing a new dimension to COIN's practice-based research capacities.
- Increasingly, COIN's member PBRNs are building research partnerships with community-based organizations and social service agencies. New partners include public health departments, school systems, and diverse non-profit agencies. Drs. Jim Werner and Kurt Stange published a paper on this topic in PBRN theme issue of the Journal of the American Board of Family Medicine in December 2014.
- COIN recently initiated supportive partnerships with newly developing PBRNs at Wright State and the
  University of Toledo. Family Medicine department chairs from these sites now participate in COIN's regular
  meetings and conference calls. Further, Dr. Werner has committed to assisting in the development of a new
  PBRN at Ohio University in Athens, OH. These three new university-based PBRN partners will expand COIN's
  reach to all corners of Ohio
- Finally, COIN's pediatric group recently submitted a health IT—based research proposal within <u>PEDSnet</u>, one
  of the 11 clinical data research networks funded by the Patient-Centered Outcomes Research
  Institute. PEDSnet is a collaboration of health care organizations and disease-specific networks working
  together to form a national pediatric learning health system. This project will study vaccination rates among
  the pediatric population.





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### **Get to Know the Members of COIN**

Who,		What	
Where, When	How	Key publication	Recently funded project
Better Health Greater Cleveland (BHGC) http://betterhealthcleveland.org/			
Director: Randall D. Cebul 700 Clinicians in 54 Practices Location: Ohio Founded in 2007	Better Health Greater Cleveland is a regional health care improvement collaborative dedicated to making Northeast Ohio a healthier place to live and a better place to do business.	Cebul RD, Love TE, Jain AK, Hebert CJ.  Electronic health records and quality of diabetes care. NEJM 2011;365(9):825-33.	An Open-Source Public Domain Health Risk Assessment for Use in Primary Care This project seeks to advance the science and knowledge regarding the use of health risk appraisals (HRAs) in primary care clinical settings. The study team proposes to reengineer an existing HRA to be a free-standing, open-source, public domain HRA engine and that will allow for easy scalability and interoperability with other interfaces, including Web sites and electronic medical record
Cincinnati Area Research Group (CARinG http://familymedicine.uc.edu/research/o	· · · · · · · · · · · · · · · · · · ·		systems from different vendors.
Director: Nancy Elder	CARing Network strives to improve the	Elder NC, Simmons T, Regan S,	Visit the CARinG Network Web site for a full
117 Clinicians in 33 Clinics Location: Ohio	quality of care within primary care practices in the greater Cincinnati region.	Gerrety E. Care for patients with chronic nonmalignant pain with and without chronic opioid prescriptions:	list of projects, including: The Assessment and Management of Chronic Pain in Primary Care Practices: To understand
Founded in 2009		a report from the Cincinnati area research group (CARinG) network. J Am Board Fam Med 2012;25(5):652- 60.	and describe the prevalence of patients with chronic pain in CARinG Network practices, current assessment and management of chronic pain and barriers and enablers to
			quality chronic pain care as perceived by physicians and medical assistants.





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Who,		What	
Where, When	How	Key publication	Recently funded project
Cincinnati Pediatric Research Group (CPR	RG)		
http://collaborativeohioinquirynetwork.			
Director: William Brinkman	The goal of the CPRG is to identify	Brinkman WB, Hartl Majcher J, Poling	<u>Developing New Technologies to Improve</u>
86 Clinicians in 25 Clinics	problems facing primary care practices	LM, Shi G, Zender M, Sucharew H,	ADHD Medication Continuity
	and patients, and to design and	Britto MT, Epstein JN Shared	The primary goal of this project is to develop
Location: Ohio	implement research aimed at addressing	decision-making to improve	and test new technologies to improve
Founded in 1996	these problems and improving care and	attention-deficit hyperactivity	medication continuity among children with
	health outcomes in the community.	disorder care. Patient Educ Couns	Attention Deficit Hyperactivity Disorder. Reduced Variability in the Management of
		2013; 93(1):95-101.	Community-Acquired Pneumonia
			The primary goal of this grant is to evaluate the
			effect of a community-acquired pneumonia
			treatment guideline in the outpatient setting
			and to determine the benefits as well as the
			unintended consequences of guideline
			implementation throughout the continuum of
			care.
Northeast Ohio Network (NEON®)			
http://www.neomed.edu/academics/me	edicine/departments/family-medicine/resea	rch/northeastern-ohio-network-neon/ne	ortheast-ohio-network/
Director: Mike Hewit	As a partnership of community physician	McCord G, Pendleton BF, Schrop SL,	Ohio Family Physician Knowledge, Use and
58 Clinicians in 33 Clinics	practices, community agencies, and	Weiss L, Stockton L, Hamrich LM.	Perceived Barriers of OARRS: A NEON® Pilot
	scientists, NEON® fosters and facilitates	Assessing the impact on patient—	Study
Location: Ohio	collaborative, interdisciplinary primary	physician interaction when physicians	The specific aims of this study were to 1) pilot
Founded in 1993	care research in order to understand the	use personal digital assistants: a	test an assessment that will later be
	needs and improve the health of the	Northeastern Ohio Network (NEON®)	administered to family physicians statewide, 2)
	people of NE Ohio and contribute to the	Study. J Am Board Fam Med	examine whether Ohio Automated Rx
	scientific knowledge base.	2009; 22(4): 353-9.	Reporting System (OARSS) use by Northeast
			Ohio family physicians is consistent with SMBO regulations, and 3) gain a better understanding
			of barriers encountered by family physicians
			when accessing information from OARRS.
1	1	1	when decessing information from OAIMS.





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Who,		What	
Where, When	How	Key publication	Recently funded project
Central Ohio PBRN (OSU-COPBRN)			
http://www.familymedicine.osu.edu/13	<u>412.cfm</u>		
Director: Mary Jo Welker	The COPBRN is committed to the	Hefner J, Wexler R, Scheck	Use of HIT to Increase Primary Care Access in
160 Clinicians in 32 Clinics	performance of high quality practice- based research in order to add to the	McAlearney A. Primary care access barriers as reported by nonurgent	Medicaid Patients The objectives of the study were (1) to
Location: Ohio	primary care knowledge base, enhance	emergency department users:	develop, implement, and evaluate an ED-PCP
Founded in 2001	the delivery of preventive medicine, and positively influence diagnosis and treatment of the health problems of patients, families, and communities.	mplications for the U.S. primary care infrastructure. Am J Med Qual 2015;30(2):135-40.	Connector program using a health IT-based intervention to reduce ED utilization and increase primary care access for Medicaid patients who do not have a regular source of primary care and (2) to improve Medicaid patients' satisfaction with care and improve communications between the ED and PCPs through use of an ED-PCP Connector program.
Rainbow Office-Based Clinical Research	Network (RRC)		
http://www.case.edu/med/pbrn/netwo	rks/RRN/		
Director: Sharon Meropol	The RRN has a distinguished history of	Meropol SB, Schiltz NK, Sattar A,	The Effect of Pre-Visit Decisions on Vaccine
216 Clinicians in 81 Clinics	generating new knowledge about how pediatrics is practiced in the real world.	Stange KC, et al. <u>Practice-tailored</u> <u>facilitation to improve pediatric</u>	Acceptance at a Community vs. Hospital-Based Teaching Pediatric Practice
Location: Ohio	Now, with funding from the Case Western	preventive care delivery: a	The study sought to compare the role of
Founded in 1999	Reserve University Clinical and Translational Science Award (CTSA), we have resources to support sharing ideas, developing evidence-based practices, and implementing new best practices through office-based research.	randomized trial. Pediatrics 2014;133(6): e1664-75.	parental pre-visit immunization attitudes on vaccine refusal rates at two pediatric practices.





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Who,		What		
Where, When	How	Key publication	Recently funded project	
	Research Association of Practices (RAP) of the PBRN Shared Resource			
http://www.case.edu/med/pbrn				
Director: Kurt Stange	The mission of RAP is to catalyze the	Leykum LK, Lanham HJ, Pugh JA,	Patient Identified Personal Strengths vs.	
405 Clinicians in 135 Clinics	generation and application of new knowledge relevant to community-based	Parchman M, Anderson RA, Crabtree BF, Nutting PA, Miller WL, Stange KC,	Deficit-Focused Models of Care Much of healthcare is focused on patients'	
Location: Ohio	practices and patient populations.	McDaniel RR. Manifestations and	weaknesses and deficits, but patients may	
Founded in 1992		implications of uncertainty for improving healthcare systems: an analysis of observational and interventional studies grounded in complexity science. Implementation Science 2014;9(1):165.  Stange KC. Refocusing knowledge generation, application, and education: raising our gaze to promote health across boundaries. Am J Prev Med 2011;41(4):S164-9.	achieve better health when they can focus on their personal strengths, as well as their interpersonal and community resources. A group of patients, caregivers, PBRN clinicians, and investigators are working to identify patient strengths and develop an interactive computer tool to assess strengths and resources. A participatory group model building process will develop computer simulation models of how patient strengths can be brought into healthcare, and what the outcomes might be. This project is supported by the Patient-Centered Outcomes Research Institute (PCORI).	





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Who,			What
Where, When	How	Key publication	Recently funded project
Safety Net Providers' Strategic Alliance (SNPSA)			
http://snpsa.weebly.com/about.html			
Director: Ann Reichsman	SNPSA is a safety net PBRN that includes	Visit the SNPSA Web site for a full list	Visit the SNPSA Web site for a full list of
120 Clinicians in 20 Clinics	federally qualified community health centers, free-clinics, and health clinics for	of publications, including: Madden MH, Tomsik P, Terchek J, Navracruz L,	projects, including: Patient Identified Personal Strengths vs.
Location: Ohio	the homeless. SNPSA members seek to	Reichsman A, Clemons Clark T, Cella	<u>Deficit-Focused Models of Care</u>
Founded in 2004	use research findings to improve practice and support health policy advocacy to close gaps in the safety net.	P, Weirich SA, Munson MR, Werner JJ. <u>Keys to successful diabetes self-management for uninsured patients:</u>	SNPSA is presently partnering with the Research Association of Practices (RAP) on this PCORI-funded project, which is described
		social support, observational learning, and turning points: a safety net providers' strategic alliance study. JNatl Med Assoc 2011;103(3):257-64.	above in the RAP section of this table.

### For more information about COIN, contact:

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For more information about the AHRQ PBRN Resource Center, please visit <a href="www.pbrn.ahrq.gov">www.pbrn.ahrq.gov</a> or e-mail <a href="mailto:PBRN@ahrq.hhs.gov">PBRN@ahrq.hhs.gov</a>



