

Patient-centered Outcomes Research: Evidence-based Research to Address Disparities

Ayodola Anise, MHS

Program Officer, Healthcare Delivery and
Disparities Research Program

January 26, 2018



PCORI's Mission and Vision

PCORI helps people make informed healthcare decisions, and improves healthcare delivery and outcomes, by producing and promoting high-integrity, evidence-based information that comes from **research guided by patients, caregivers, and the broader healthcare community.**

Our Strategic Goals:



Increase quantity, quality, and timeliness of useful, trustworthy research information available to support health decisions



Speed the implementation and use of patient-centered outcomes research evidence



Influence research funded by others to be more patient-centered



Key Components of the Research We Fund

COMPARATIVE EFFECTIVENESS RESEARCH

Compares 2 or more treatments, drugs, health system practices, screening practices, or methods for delivering care

PATIENT CENTEREDNESS

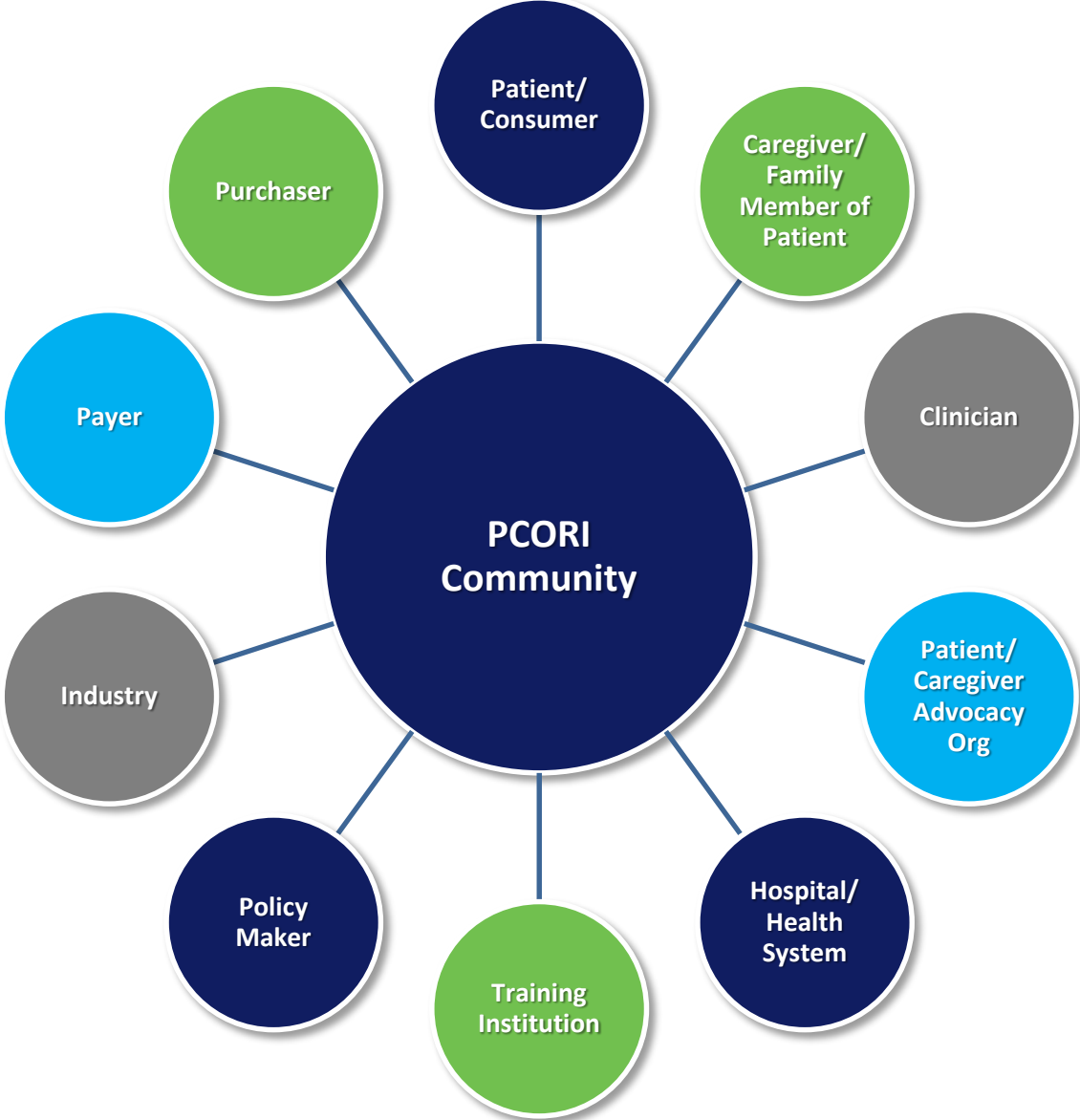
Answers questions or examines outcomes that matter to patients and caregivers

PATIENT & STAKEHOLDER ENGAGEMENT

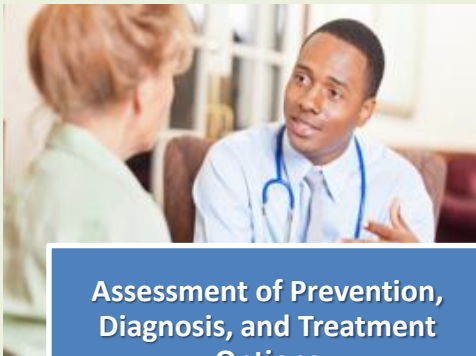
Engages scientists, patients, and other stakeholders in an active and meaningful way throughout the entire study



Who Are Our Stakeholders?



National Priority Areas of Research



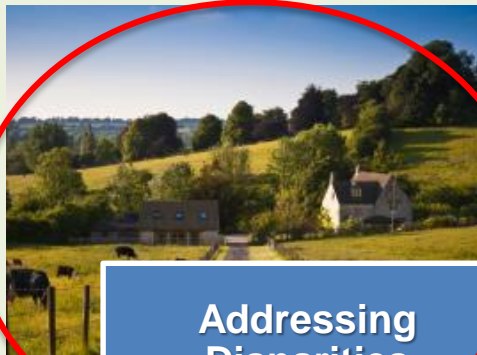
Assessment of Prevention, Diagnosis, and Treatment Options



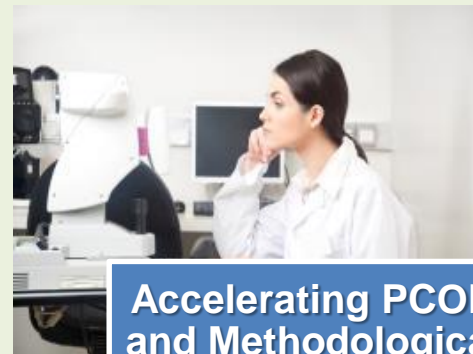
Improving Healthcare Systems



Communication & Dissemination Research



Addressing Disparities



Accelerating PCOR and Methodological Research



Addressing Disparities Program Mission Statement

PCORI's Vision, Mission, Strategic Plan

```
graph TD; A[PCORI's Vision, Mission, Strategic Plan] --> B[Program's Mission Statement]; B --> C[Program's Guiding Principle];
```

Program's Mission Statement

To **reduce disparities** in healthcare outcomes and **advance equity** in health and healthcare

Program's Guiding Principle

To support comparative effectiveness research that will identify best options for reducing and **eliminating disparities**



Snapshot of Addressing Disparities Funded Projects

Number of
Projects:

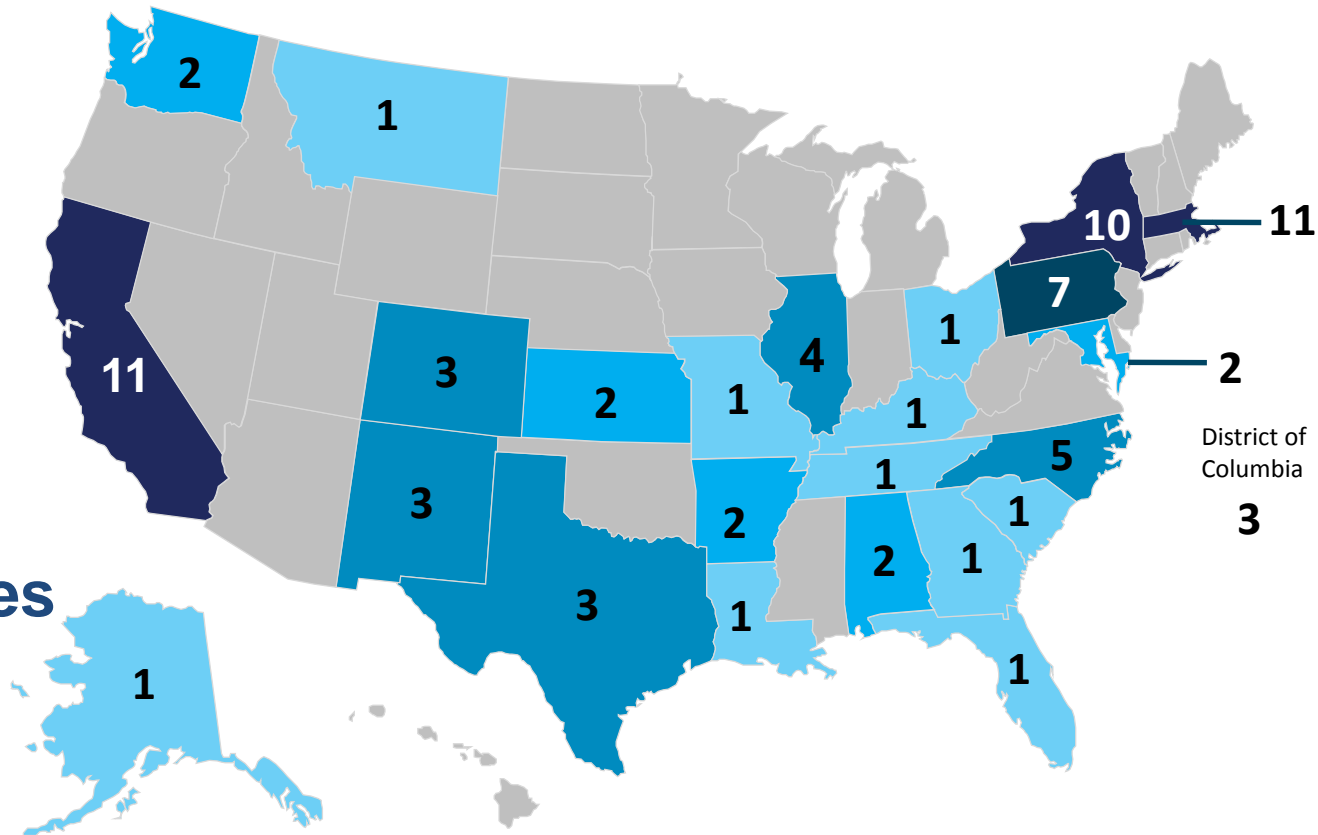
80

Amount
Awarded:

\$240 million

Number of States
Where We are
Funding
Research:

24 (plus the District
of Columbia)

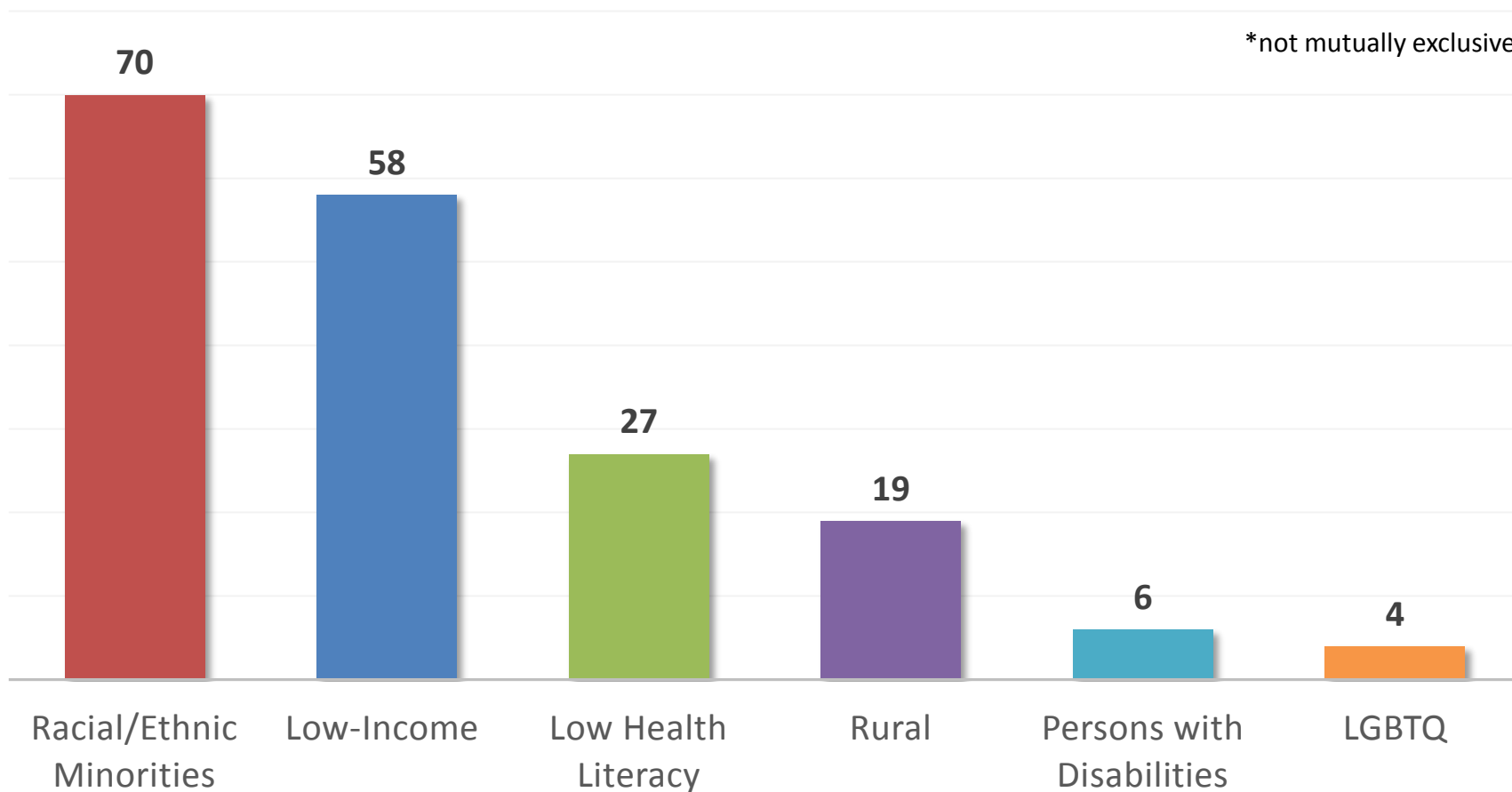


As of November 2017



Addressing Disparities Populations of Interest

of Projects in Portfolio



Examples of How PCORI-funded Asthma Studies Are Filling Critical Evidence Gaps



PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

Interventions: Community Health Workers

WHAT WE KNOW

CHWs bridge the healthcare system and community

CHWs provide self-management support and assist with home environmental asthma trigger remediation

Evidence suggests that for children and racial/ethnic minorities, CHWs improve asthma outcomes

WHAT WE DON'T KNOW

How much more do CHWs improve asthma outcomes compared to other interventions?

For which populations are CHWs more effective?

Can CHWs be used effectively to serve as liaisons with clinical staff?

What elements of CHW training and certification work best?



Interventions: Community Health Workers

6 of 13 ASTHMA CER STUDIES TEST THE EFFECTIVENESS OF COMMUNITY HEALTH WORKERS

5 of 13 ASTHMA CER STUDIES ADDRESS CHWS AND HOME ENVIRONMENTAL ASTHMA TRIGGER REMEDIATION

4 of 13 ASTHMA CER STUDIES HAVE ALIGNED OUTCOME MEASURES AND MAY AGGREGATE STUDY RESULTS

The Houston Home-based Integrated Intervention Targeting Better Asthma Control (HIIT-BAC) for African Americans (PI: Winifred Hamilton)

- 2 arm RCT with 300 African American patients 18+ years
- Compares enhanced clinic care to a CHW home-based asthma control and environmental intervention
- CHWs and environmental hygienists assess the home environment and provide potential strategies to mitigate triggers



Interventions: System and Clinical Decision Supports

WHAT WE KNOW

Educating clinicians can promote or reinforce knowledge and attitudes, but by itself may not be enough to improve care

System and clinical decision supports prompt guideline-based care and address the organization and delivery of asthma care

Supports include: EHR enhancements, audit and feedback, care teams, modification to notes, care plans, orders, practice facilitation

WHAT WE DON'T KNOW

How do we effectively align supports better with professional workflows so that pertinent and timely advice is easily accessible

Can supports improve processes and patient outcomes?

How effective are clinical supports when combined with patient education and self-management support?



Interventions: System and Clinical Decision Supports

4 of 13 CER ASTHMA STUDIES ADDRESS USE OF SUPPORTS

EARLY RESULTS FROM STUDIES SUGGEST THAT DECISION SUPPORTS IN CONJUNCTION WITH CHWS IMPROVE PATIENT OUTCOMES

Imperial County Asthma CER Project (PI: John Elder)

- 2x2 factorial design, RCT with 400 Hispanic/Latino children 6-17 years
- Comparing a family and clinic intervention nested in a community intervention
- Clinics have modified staffing and workflow and use asthma educators/case managers
- System changes include asthma care templates that can be tailored and prompts to support clinician decision making, sharing of educational messages, treatments, and behavioral recommendations



Lessons Learned by Addressing Disparities through Funding CER Research

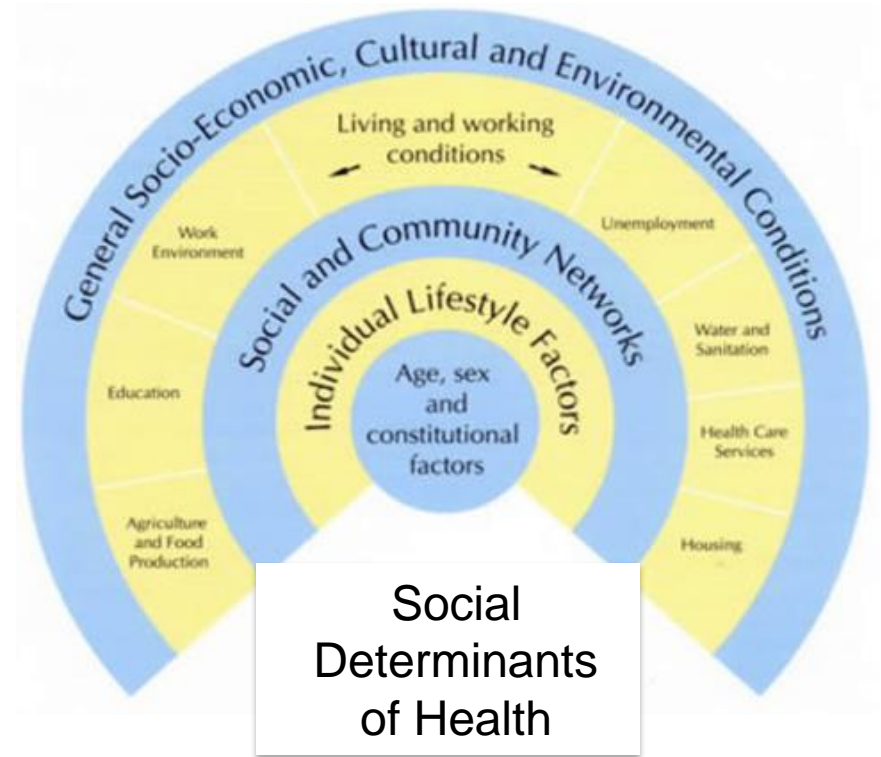


PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

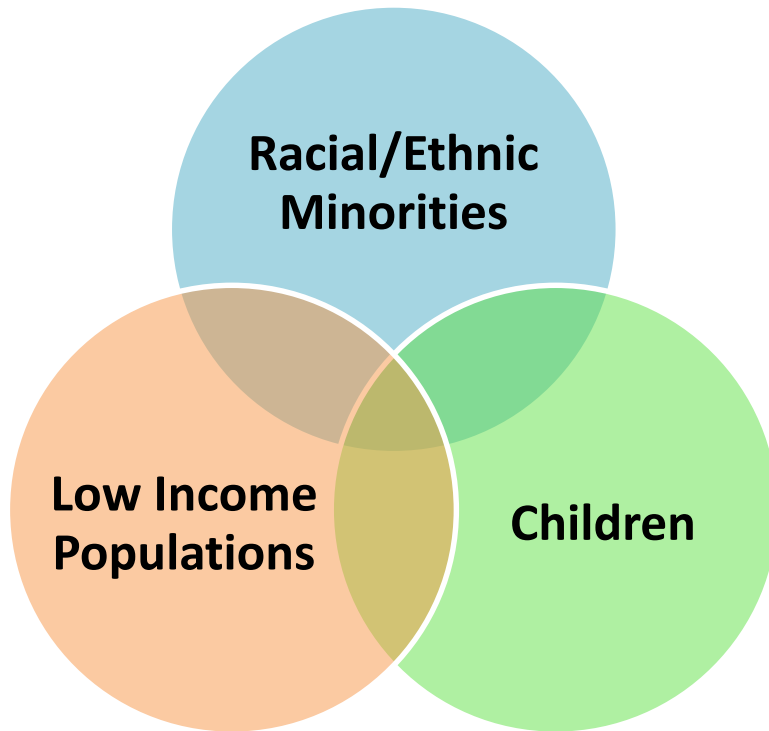
Lessons Learned: Improving Opportunities to Influence Healthcare Practice

Comparative effectiveness research studies include interventions that address clinical factors while taking account of and addressing social determinants of health

Results from PCORI-funded studies may help health systems better understand how to incorporate social determinants of health with clinical interventions



Lessons Learned: Addressing Intersectionality of Populations



Studies are (indirectly) addressing health and disease at different intersections

Intersectionality can enrich research through improved validity and greater attention to heterogeneity of treatment effects

Intersectionality in research can promote the creation of evidence that can be used in healthcare practice



Lessons Learned: Speeding the Implementation and Use of Patient-Centered Outcomes Research

One study is not enough to change practice

Effectiveness of interventions does not lead to implementation and use of research evidence

Drivers of practice change should be taken into consideration and serve as the link between research evidence and impact

- Stakeholder Buy-in & Advocacy
- Quality Measures
- Guideline Adherence
- Technology
- Coverage and Payment Policy
- Sustainability
- Feasibility of Implementation



What's Next ?



PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

What's Next for the Addressing Disparities Research Portfolio?

Continue to identify and fund high-priority CER questions relevant to reducing and eliminating disparities in health and healthcare outcomes

Conduct portfolio analyses to understand the potential impact of similar projects (e.g., studies on asthma, studies with community health worker interventions)

Disseminate and facilitate the adoption of promising/best practices to reduce and eliminate health and healthcare disparities through partnerships with PCORI stakeholders



