

Communication and Dissemination Research

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PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

Welcome!



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Presentation Outline

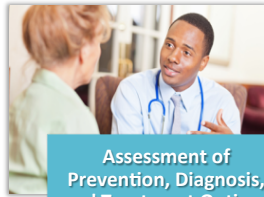
- Portfolio overview
- Strategic shift
 - Example projects
- The future of CDR



Portfolio Overview



The Research We Fund Is Guided by Our National Priorities for Research



Assessment of
Prevention, Diagnosis,
and Treatment Options



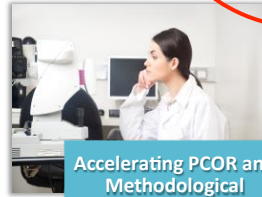
Improving Healthcare
Systems



Communication &
Dissemination Research



Addressing Disparities



Accelerating PCOR and
Methodological
Research



Background

- Patients, caregivers, and clinicians need to be equipped with the best available information for making informed decisions.
- Knowledge about how to optimally communicate and facilitate the effective use of evidence, information, and tools by patients, caregivers, and providers is lacking in many areas.
- Strategies are needed to make existing Patient-centered Outcomes Research information available to patients and providers and to make the dissemination and implementation of this knowledge feasible in various contexts.



Communication and Dissemination Research

- The Communication and Dissemination Research (CDR) program seeks to fund projects that address critical knowledge gaps in the communication and dissemination process:
 - The communication and dissemination of research results to patients, their caregivers, and clinicians
 - The communication between patients, caregivers, and clinicians
- To enable patients and caregivers to make the best possible decisions in choosing among available options for care and treatment

Available Funds: Up To \$8 Million

Total Direct Cost : \$1.5 million

Maximum Project Period: 3 years



Research Areas of Interest

Communication strategies to promote the use of health and healthcare CER evidence by patients and clinicians

Dissemination strategies to promote the use of health and healthcare CER evidence by patients and clinicians

Explaining uncertain health and healthcare CER evidence to patients and clinicians



CDR Program

- The CDR Program seeks to fund investigator-initiated research in:
 - Head-to-head comparison of demonstrated communication interventions, strategies, and tools
 - Translation of research, decision support interventions, and risk communication
 - Distribution of CER to patients, caregivers, and providers
 - Patient, clinician, and stakeholder engagement with CER



We Fund Research That...

- Studies the benefits and harms of interventions and strategies delivered in real-world settings
- Compares at least two alternative approaches
- Adheres to PCORI's Methodology Standards
- Is based on health outcomes that are meaningful to the patient population
- Engages patients and other stakeholders at every stage
- Is likely to improve current clinical practices



We Focus Attention On...

- **Conditions**
 - That affect large numbers of people across a range of populations
 - That place a heavy burden on individuals, families, specific populations, and society
 - Are rare diseases, which are difficult to study
- **Populations**
 - Racial and ethnic minorities
 - Older adults
 - Low-income and rural populations
 - Children



We Follow a Unique Proposal Review Process

Applications are reviewed against five criteria:

- ✓ Impact of the condition on the health of individuals/populations
- ✓ Potential for the study to improve healthcare and outcomes
- ✓ Technical merit
- ✓ Patient-centeredness
- ✓ Patient and stakeholder engagement

Applications are reviewed by a panel of two scientists, one patient, and one other stakeholder.

PCORI's Board of Governors makes funding decisions based on Merit Review and staff recommendations.



We Require Patient-Centeredness and Patient and Stakeholder Engagement

Patient-Centeredness

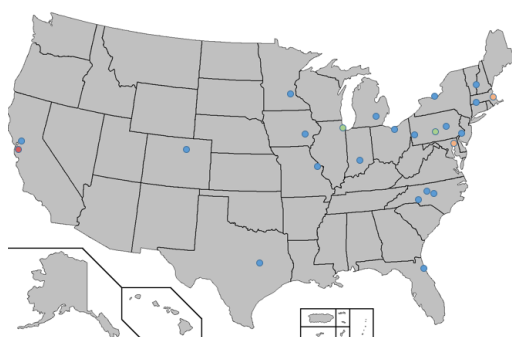
- Does the project aim to answer questions or examine outcomes that matter to patients within the context of patient preferences?
- Research questions and outcomes should reflect what is important to patients and caregivers.

Patient and Stakeholder Engagement

- Patients to be partners in research, not just “subjects”
- Active and meaningful engagement between scientists, patients, and other stakeholders
- Community, patient, and caregiver involvement already in existence or subject of a well-thought-out plan



Current Portfolio



Number of Projects:
33

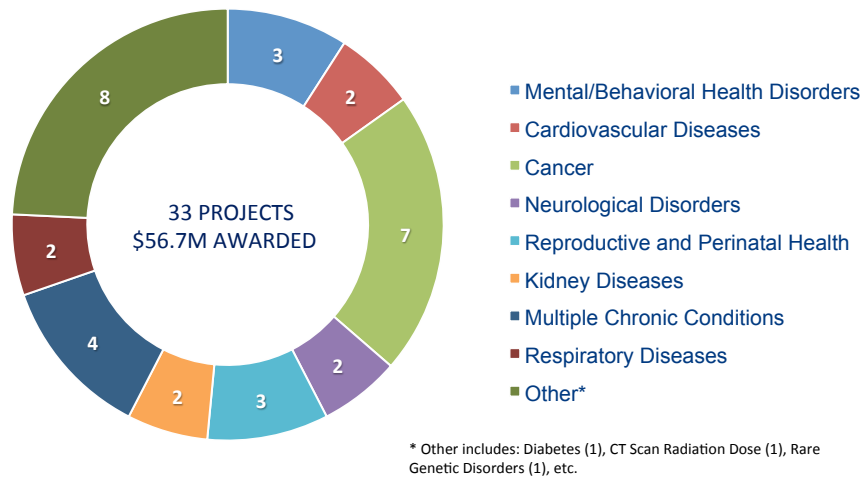
Amount Awarded:
\$56.7 million

Number of states
where we are funding
research:
17

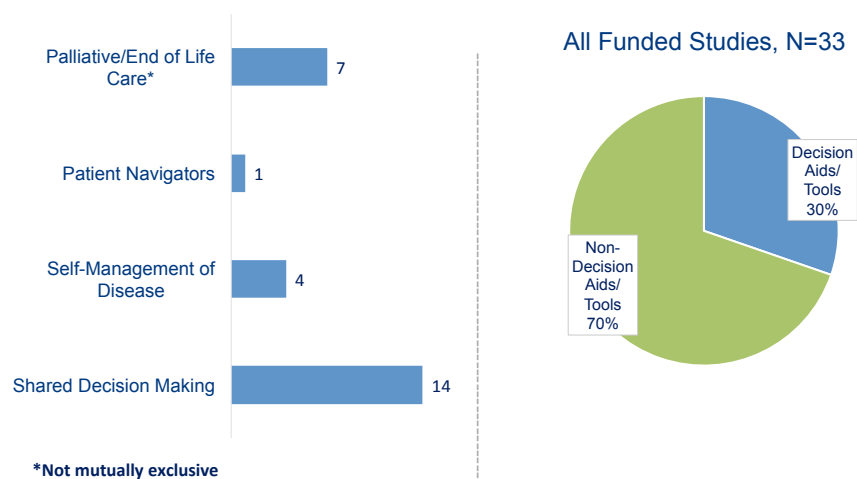
● = 1 studies ● = 3 studies
● = 2 studies ● = 4 studies



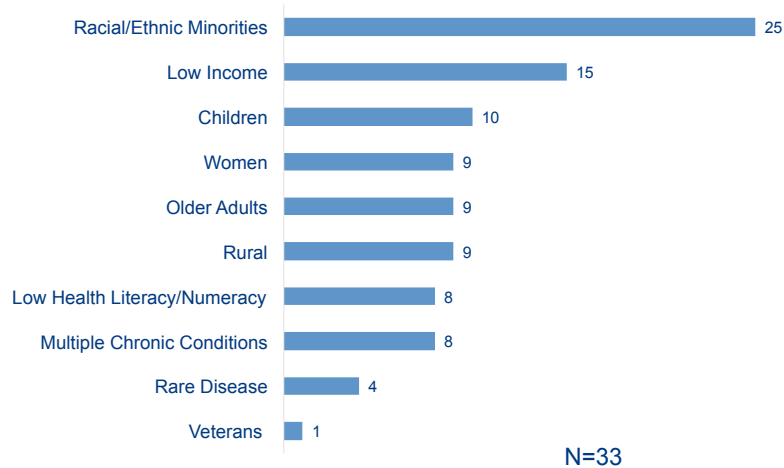
Portfolio by Disease/Condition



Portfolio by Common Themes



Portfolio by PCORI Priority Populations*



***Not mutually exclusive**

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Strategic Shift and Example Projects



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CDR Staffing

Jean Slutsky, Program Director	(February 2014)
Bridget Gaglio, Program Officer	(June 2014)
Chris Gayer, Program Officer	(June 2014)
Sarah Chew, Program Assistant	(August 2014)
Michelle Henton, Program Associate	(February 2015)
William (Bill) Lawrence, Sr. Program Officer	(February 2015)
Additional Program Officers	(TBD)



Period of Transition

- Prior to June 2014:
 - Many studies had been funded with significant effort towards intervention/tool development.
- Following CDR Staffing:
 - Emphasis on head-to-head comparisons of demonstrated interventions, strategies, and tools.



Decision Aid Work Group

- Based on the large number of decision aids funded across PCORI, CDR created a science-wide work group to examine the decision aid portfolio.
- Developed Task Order with a group at Duke to:
 - Conduct an extensive and exhaustive search to identify, categorize, and describe PCORI's decision aid/tool portfolio
- Findings will inform:
 - Strategic portfolio development
 - Potential targeted funding announcements



Project Examples



Project Example #1

A Multicenter Trial of a Shared Decision Support Intervention for Patients and Their Caregivers Offered Destination Therapy for End-Stage Heart Failure

- Evaluates the effectiveness of a destination therapy left ventricular assist device (DT LVAD) shared decision support intervention for both patients and caregivers using a stepped wedge randomized trial design
- Assesses the adoption, implementation, and maintenance of the intervention across multiple providers and settings in order to maximize potential for dissemination and implementation in different settings and contexts

Larry Allen, MD
University of Colorado-Denver
Aurora, CO



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Project Example #2

Describing the Comparative Effectiveness of Colorectal Cancer Screening Tests: The Impact of Quantitative Information

- Evaluates the impact of viewing quantitative information in a decision aid on screening intention, screening behavior, and perceptions of risk in patients eligible for colorectal cancer screening
- Examines whether numeracy moderates the effect of quantitative information on screening behavior
- Uses a public deliberation exercise to review the results of the clinical trial and to make recommendations about how decision aids should present quantitative information to patients

Peter Schwartz, MD, PhD
Indiana University
Indianapolis, Indiana



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CDR's Future



CDR Program Goals

- Launch the CDR Advisory Panel in May 2015
- Continue to refine the Broad PFA (most recently February 4, 2015)
- Consider larger, more targeted stakeholder-driven investments
 - Host a Program-Specific Pragmatic Trial
 - Develop a Targeted PFA
- Contribute to PCORI Dissemination and Implementation Framework



Coming Soon: CDR Advisory Panel

- Identify and prioritize health communication and dissemination research topics
- Suggest new topics for future prioritization
- Provide feedback on specific research questions and study designs
- Review and comment periodically on the research portfolio, including identification of gaps, and the overall impact of the portfolio
- Bring perspectives from other disciplines, patients, and caregivers



Questions?

Thank You!

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