

Vol. 1 No. 1

Spring / Summer 2007 Newsletter

IRENE MISSION and PURPOSE

IRENE's mission is to improve the health and well-being of Iowans through collaboration in practice-based research on questions important to primary care physicians and their patients. IRENE's purpose is to create and foster a network of research collaboration between the academic medical center and primary care physicians through out the state of Iowa with a particular focus on improving rural health.

IRENE Web Site

http://www.uihealthcare.com/depts/med/familymedicine/research/irene/index.html

CONTRACT AWARDED

The Agency for Healthcare Research and Quality (AHRQ) awarded a contract to IRENE in response to their Request for Proposal (RFP) No. AHRQ-06-00029, entitled "Primary Care – Practice Based Research Networks (PBRNs)". It is a cost reimbursement, multiple-award, task order-type contract for a period of three years with one, two-year option. The overall objective of this procurement is to improve frontline clinical care for all Americans through rapid turn-around work conducted by PBRNs leading to new knowledge and improving primary care.

Federal legislation has directed AHRQ to employ research strategies and mechanisms that link research directly with clinical practice in geographically diverse locations throughout the country, including the use of "provider-based research networks... especially (in) primary care."

AHRQ has defined a PBRN as a group of ambulatory practices devoted principally to the primary care of patients, affiliated with each other (and often with an academic or professional organization) in order to investigate questions related to community-based practice and to improve the quality of primary care. Practice based research is grounded in, informed by, and intended to improve practice. This definition has included a sense of ongoing commitment to network activities by PBRN participants and an organizational structure that transcends a single project.

Nine other PBRNs were awarded this contract and include:
Children's Hospital of Philadelphia – Pediatric Research Consortium
University of Colorado – State Networks of Colorado Ambulatory Practice & Partners (SNOCAP)
Minnesota Academy of Family Physicians – MAFPRN
University of New Mexico – RiosNet (consortia)
North Carolina – consortia with UNC and Duke
Oklahoma Physicians Resource/Research Network – OKPRN
Oregon Health & Science University – ORPRN
Medical University of South Carolina – PPRN
Virginia Commonwealth University – ACORN

DIRECTOR of IRENE



Barcey Levy, PhD, MD Director of IRENE Professor Department of Family Medicine University of Iowa <u>barcey-levy@uiowa.edu</u> (319) 384-7622

RESEARCH DIRECTOR



Arthur Hartz, MD, PhD IRENE Research Director Professor for Quality in Family Med Department of Family Medicine University of Iowa <u>arthur-hartz@uiowa.edu</u> (319) 384-6892

The letters of support you provided were instrumental in demonstrating the commitment of IRENE physicians and we are very appreciative. We were able to include 95 letters of support in this grant submission.

We will be inviting IRENE members to participate in task order work. When a task order proposal (request) comes out, we will have to respond within 4-5 weeks. We will contact you by fax to see if you are interested in participating and we may ask for a letter of support.

It is expected that individual task orders will be completed within a relatively short time frame, depending on the type and scope of work requested. For example, a six month turn-around time could be required for a brief survey of current clinical practices, while a longer period of time (12-18 months) may be allowed for more complex questions and study designs.

PBRN and IRENE HISTORY

In 1994, 28 PBRNs could be identified in the U.S. In 2003, the PBRN Resource Center identified 111 PBRNs, with network practices located in all 50 states. These networks have now "demonstrated a capacity to use multiple methods to answer very important questions that matter to millions of people." [Green LA, Hickner J. A short history of primary care practice-based research networks: from concept to essential research laboratories. *J Am Board Fam* Pract 2006; 19:1-10] These "clinical research laboratories" are facilitating the understanding of what is happening in community-based primary care practices.

In 2001, the Iowa Research Network, a practice-based research network, was established through the joint efforts of the Iowa Academy of Family Physicians (IAFP), the University of Iowa Department of Family Medicine, and the IAFP Foundation (IAFP/F) under the leadership of Paul James, MD and Arthur Hartz, MD, PhD.

Summary of Iowa Research Network Characteristics – 1/8/07

| Practice Characteristics (for 130 practices ³) | | | | | |
|--|----------|----------|--|--|--|
| | Mean | SD | | | |
| Number of physicians | 6.44 | 6.1 | | | |
| Number of PA's | 0.92 | 1.2 | | | |
| Number of nurse practitioners/APN | 0.74 | 1.0 | | | |
| Number of nurse aides | 7.50 | 8.0 | | | |
| Number of unique patients | 8,450.0 | 8,018.0 | | | |
| Number of patient visits/year | 30,943.0 | 22,463.0 | | | |

| Practice Type | | | | | | |
|---------------------------------------|---------------|------|----------------|------|--|--|
| | 157 Practices | | 267 Physicians | | | |
| | N | % | N | % | | |
| Solo | 10 | 6.4 | 10 | 3.7 | | |
| FM Group | 111 | 70.0 | 167 | 62.5 | | |
| Residency (Academic and Non-academic) | 14 | 8.9 | 46 | 17.2 | | |
| Multi-specialty | 22 | 14.0 | 44 | 16.5 | | |

¹ 98 practices provided actual survey data
 ² 2000 United States census data was used for estimates
 ³ 130 practices provided data on their practices

| Description of Age Groups of Patients Seen by Practices | | | | | |
|---|---|------|--|--------|-----|
| | Actual survey data N=98 Practices ¹ | | Estimates from census N=59 Practices ² | | |
| Age groups of patients (years) | Mean % | SD | Age groups of population (years) | Mean % | SD |
| 0-5 | 11.4 | 5.9 | 0-4 | 6.3 | 1.2 |
| 6-18 | 15.0 | 8.7 | 5-19 | 21.5 | 1.8 |
| 19-40 | 23.0 | 11.8 | 20-44 | 34.5 | 5.6 |
| 41-64 | 24.8 | 10.1 | 45-59 | 17.2 | 2.2 |
| 65-80 | 19.4 | 11.2 | 60-84 | 17.5 | 4.8 |
| Over 80 | 8.6 | 5.8 | 85 and over | 3.0 | 1.8 |

| Description of Ethnicity/Race of Patients Seen by Practices | | | | | |
|---|---|------|--|-----|--|
| | Actual survey data N=98 Practices ¹ | | Estimates from census N=59 Practices ² | | |
| Ethnicity/Race of patients | Mean % | SD | Mean % | SD | |
| African-American | 5.1 | 6.8 | 1.7 | 2.5 | |
| Asian | 3.2 | 4.4 | 1.3 | 1.4 | |
| Hispanic | 7.4 | 10.3 | 2.9 | 3.5 | |
| Native American | 1.6 | 2.7 | 0.3 | 0.5 | |
| Caucasian | 85.4 | 16.3 | 94.5 | 4.8 | |

IRENE PUBLICATIONS

Bergus GR, Hartz AJ, Noyes R Jr., Ward MM, James PA, Vaughn T, Kelley PL, Sinift SD, Bentler S, Tilman E. The Limited Effect of Screening for Depressive Symptoms with the PHQ-9 in Rural Family Practices. Journal of Rural Health, 2005;21(4):303-9.

Ernst ME, Carter BL, Goerdt CJ, Steffensmeier JJ, Phillips BB, Zimmerman MB, Bergus GR. Comparative Antihypertensive Effects of Hydrochlorothiazide and Chlorthalidone on Ambulatory and Office Blood Pressure. Hypertension. 2006;47(3):352-8.

Milchak JL, Carter BL, Ardery G, Black HR, Bakris GL, Jones DW, Kreiter CD. Development of Explicit Criteria to Measure Adherence to Hypertension Guidelines. Journal of Human Hypertension. 2006;20(6):426-33.

Ely JW, Osheroff JA, Ebell MH, Chambliss ML, Vinson, DC, Stevermer JJ, Pifer EA. Obstacles to answering doctors' questions about patient care with evidence: qualitative study. BMJ. 2002;324:1-7.

Ely JW, Osheroff JA, Chambliss ML, Ebell MH, Rosenbaum ME. Answering physicians' clinical questions: obstacles and potential solutions. Journal of the American Medical Informatics Association. 2005;12(2):217-24.

Carter BL, Hartz A, Bergus G, Dawson JD, Doucette WR, Stewart JJ, Xu Y. Relationship Between Physician Knowledge of Hypertension and Blood Pressure Control. The Journal of Clinical Hypertension. 2006;8:481–486.

Levy BT, Dawson J, Hartz AJ, James PA. Colorectal Cancer Screening Among Patients Cared for by Iowa Family Physicians. American Journal of Preventive Medicine. 2006;31: 193-201.

Nordin TA, Hartz AJ, Noyes Jr. R, Anderson MC, Rosenbaum ME, James PA, Ely JW, Agarwal N, Anderson SW, Levy BT. Empirically Identified Goals for the Management of Unexplained Symptoms. Family Medicine. 2006;38(7):476-82.

Hartz, A., Kent, S., James, P., Xu, Y., Kelly, M., & Daly, M. (2006). Factors that Influence Improvement for Patients with Poorly Controlled Type 2 Diabetes. Diabetes Research and Clinical Practice, 74, 227-232.

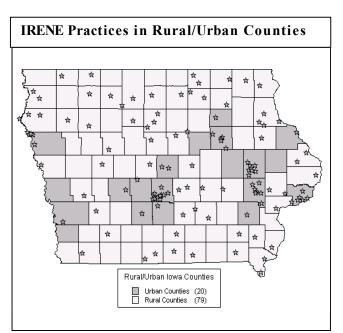
If you would like a copy of any of these publications, please send an email to: irene@uiowa.edu

IRENE WISE QI

In March, 2006 IRENE was awarded a grant through AHRQ for a project entitled, "An Evaluation of the WISE QI Program". Principal investigator: Paul James, MD, and Co-Investigators: Elizabeth Clark, MD, Jeanette Daly, RN, PhD, Jeffrey Dawson, ScD, Arthur Hartz, MD, PhD, and Barcey Levy, PhD, MD. The award amount was \$442,500. The purpose of the project is to test the effectiveness of a multifaceted intervention program to improve the quality of care for high-risk diabetic patients in rural settings. The program to be tested is the Wellmark Incentive-Support to Encourage Quality Improvement (WISE QI) which is based on the chronic care model.

Practices participating in this project include: Manchester Family Medical Associates, Dr. R. Boom in Manchester, IA; Medical Associates, PC, Dr. D. Doorenbos in Le Mars, IA; McFarland Clinic, Dr. J. Carroll in Carroll, IA.

One more practice is need for this project. Please contact Barcey Levy or Jeanette Daly if you are interested in participating. The toll free phone number is: 866-890-5963.



IRENE CONTACT INFORMATION Phone: 319-384-7765 (Secretary, Jenny Powell) Toll free phone: 866-890-5963 Fax: 319-353-6725 e-mail: irene@uiowa.edu



IRENE Dinner Meeting

Wednesday, April 11, 2007

5:15pm – 5:45 pm gather 5:45pm - 7:15pm dinner and program

Iowa Memorial Union – Room 245 2nd floor Board Room across from Ballroom

University of Iowa, Iowa City, IA

The Iowa Research Network (IRENE), staff and the University of Iowa, Department of Family Medicine would like to invite you to come for dinner and meet other IRENE physicians and find out what is happening in this practice-based research network (PBRN). Practice-based research is grounded in, informed by, and intended to improve practice. We want to know how we can best help you with quality improvement or in the questions that arise in the care of patients. IRENE was recently honored by being awarded the opportunity to compete along with a select few networks for task orders relating to primary care based research from AHRQ (Agency for Health-Care Research and Quality).

All interested clinicians welcome! Please complete the bottom form and fax back to us at 319-353-6725. We hope you can join us!

Sincerely,

Barcey T. Levy, Ph.D., M.D. Director of IRENE Department of Family Medicine University of Iowa

Name: _____

- □ Yes, I can attend the dinner on Wednesday, April 11th
- □ Yes, I can attend and would like a vegetarian option
- □ No, I am unable to attend, but am interested in future events.

Fax back to 319-353-6725