

### CM&R

**Community Medicine & Research Newsletter** 

Spring 2016

#### **Message from the Director**

Spring is here! It is a time of renewal and growth across the beautiful countryside in Kentucky. Spring also signifies a time of growth and opportunities for the Division of Community Medicine and the Kentucky Ambulatory Network (KAN). In this issue of the CM&R, we highlight several presentations at national conferences based on the work we have been conducting. On March 10, 2016, I had the opportunity to present population health management principles to the Kentucky Chapter of the MGMA. It was an opportunity to showcase our leadership in an area of growing importance to healthcare administrators.

We also find ourselves at a time of intense data analyses for several studies that we've been working on for the last several years. This includes our Terminate Lung Cancer study, the Central Appalachia Inter-professional Chronic Pain Collaborative, and the Bridges to Home study. We are recognizing the incredible impact that our

programs have made on the populations that we serve. For example, we have significantly improved knowledge about chronic pain management across a spectrum of learners and professions in our various educational activities. Also, the Bridges to Home study revealed a significant impact on quality of life measures as a community health worker assisted patients at high risk for hospital readmission.

Along with tremendous growth, our Spring season is a time for reflection and to ensure that we are conducting programs and studies that are important to the communities we serve. None of this is possible without the collaboration with our KAN members and Community Medicine partners. Let us continue making a difference!





Roberto Cardarelli, DO, MPH, FAAFP Director, KAN Professor and Chief of Community Medicine

https://familymedicine.med.uky.edu/kentucky-ambulatory-network-kan

# Spring in Kentucky

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   & Research Match
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### Invited Speaking Engagement at the American College of Preventive Medicine/ CDC Health Systems Transformation Institute

On February 24, 2016 Dr. Cardarelli and leaders from the American College of Preventive Medicine, CMS, and the CDC presented at the Health Systems Transformation Institute meeting in Washington DC. This meeting was a kick-off event for the American College of Preventive Medicine annual conference.

This hands-on workshop style meeting hosted over 90 participants to learn about the factors that impact, and role preventive medicine has, in our emerging and transforming value-based healthcare system. Dr. Cardarelli was invited to present on how community (lay) health workers can be an effective part of team-based approaches for caring for high risk individuals in the hospital setting. Using the results of the Bridges to Home study, he was able to demonstrate the impact of such models; specifically, how addressing the social determinates of health can have an underlying impact on health outcomes, including thirty-day readmission rates and quality of life measures. This model was presented to provide a context if not a potential solution for more resource-limited rural and community hospitals.



#### Dr. Hustedde Presents at Association for Prevention Teaching & Research (APTR) Spring Conference

Dr. Hustedde presented a paper on March 14th at the annual meeting of the Association for Prevention Teaching and Research, in Albuquerque, NM. The theme of the conference was "Preparing Students to Address Emerging Issues," with attendees from medical schools and schools of public health across the US.

Dr. Hustedde reported on the teaching collaboration for Family Medicine residents and PharmD students during their Community Medicine rotation at Bluegrass Community Health Center. The presentation was entitled "UK Family Medicine/Pharmacy Curricular Change: Developing Interprofessional Collaboration in federally qualified health centers (FQHCs)."

The presentation provided a description of the valuable training opportunities present in the FQHC setting, and identified the opportunities that are available to health professional trainees to discuss and obtain information on health care reform and its consequences on underserved populations. Dr. Hustedde also provided details on the curricular elements that are necessary to provide an interprofessional community medicine experience.

#### KAN Advisory Board













From Top to Bottom:

Gerry Stover
David Bolt
David Greene, MD
Stephanie Moore, BHS, MPA
Brent Wright, MD, MMM
Marshall E. Prunty, MD

## AAMC/Donaghue Foundation Awards \$300,000 3-year Grant

The AAMC and The Patrick and Catherine Weldon Donaghue Medical Research Foundation announced the recipients of the 2015 funding opportunity *Advancing Implementation Science in Community/ Academic Partnered Research.* This grant, offered in partnership with the AHEAD Initiative, seeks to identify, evaluate, and disseminate effective and replicable AAMC-member practices that improve community health and reduce health inequities. Only 2 applicants were awarded in the US, and we are ecstatic that a KAN member site was one of those chosen!

Researchers were asked to develop proposals highlighting collaboration between academic health centers and community partners, focused on prioritized needs identified through the medical center's Community Health Needs Assessment (CHNA).

In partnership with St. Claire Regional Medical Center (SCRMC), Dr. Cardarelli and his team will implement an educational curriculum aimed at reducing lung cancer rates through early screening and tobacco cessation in the rural region served by SCRMC. Professionals who serve the population will participate in a series of educational opportunities intended to create change in knowledge and attitudes toward lung cancer screening and tobacco cessation guidelines. In addition, 5 clinics will participate in a tailored implementation approach to increase screening and tobacco cessation counseling. The study will evaluate experiences and uptake of the education program and implement and monitor clinic processes and workflows. The research team anticipates an approximate 40% shift from late stage diagnosed lung cancers (Stage III/IV) to earlier stages (Stage I/II) based on the screening intervention efforts. Measured drivers for these histologic outcomes will be rates of LDCT screening and orders for smoking cessation counseling at the clinic level.

#### **RECRUITING! POPS**

As you are keenly aware, primary care providers face a significant dilemma when determining whether or not to prescribe opioids for their patients with chronic non-cancer pain. They must balance the potential pain relief from opioids with the risks of opioid misuse or abuse. We would like to invite you to participate in this study through an interview about your experiences in this area. With your help, innovative research can lead to better health care.

**Step 1 is to take a brief survey.** Your answers will tell us whether your practice type is one we need for this study. Even if you don't qualify, the information you provide is still very helpful. <a href="https://ppodstudy.rti.org/physician/ky/">https://ppodstudy.rti.org/physician/ky/</a>

Step 2 is an in-person interview at your office or choice of location. The interview will last about one hour. After the interview, we will give you a \$90 gift card as a thank you.

If your answers indicate that you qualify for our Physicians' and Pharmacists' Opioid Prescribing Study, we will call you to schedule an in-person interview. If you have questions you may call us and leave a confidential message at (859) 323-1381 (Dr. Freeman).

# Improving Knowledge in Chronic Pain Care: Central Appalachia Inter-Professional Pain Education Collaborative (CAIPEC)

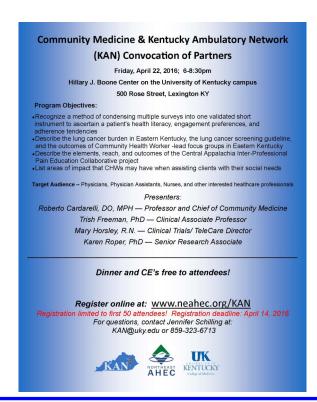
The Central Appalachia Inter-Professional Pain Education Collaborative (CAIPEC) has completed its multi-faceted CE activities to educate providers in managing patients afflicted with chronic pain. These activities have included 4 state conferences and 8 roundtables across Kentucky and West Virginia, and the development and launching of 8 webcasts.



In approximately 12 months we have reached over 500 learners across these activities. Based on knowledge testing in over 300 of these participants, we have shown a significant increase in knowledge based on competency testing. In addition, when we compared these learners to a control group of 50 providers who did not participate in CAIPEC activities, we found significant differences between these two groups in chronic pain management knowledge.

The study teams are currently undergoing chart evaluations for our implementation science study phase involving 20 providers and/or clinics that have implemented quality improvement interventions related to chronic pain management. Chart reviews should be complete by the end of April with results forthcoming.

# Registration Now Open! Division of Community Medicine/ KAN Convocation of Partners



6- 6:30pm	Arrive, mingle, cocktailsAll attendee:
C-20 C-25	William College
6:30-6:35pm	Welcome remarksRoberto Cardarel
6:35- 6:55pm	Patient Engagement Literacy Adherence studyKaren Rope
6:55- 7:15pm	Central Appalachia Inter-Professional Pain Education CollaborativeR. Cardarel
7:15- 7:35pm	Navigating high-risk in-patient clients using a lay-health worker model in Eastern Kentucky, The Bridges to Home Pilot ProjectMary Horsle
7:35- 7:55	Pharmacists and Physicians Opioid Prescribing StudyTrish Freema
7:55- 8:15pm	Reducing the Lung Cancer Burden in Northeast Kentucky Through an Academic/ Community Partnership: A Terminate Lung Cancer Study
8:30pm	Announcements/ Adjourn
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#### The Kentucky Ambulatory Network Registry Project & ResearchMatch

The KAN registry project, which began in the summer of 2015, was developed in an effort to build a database of individuals who are interested in participating in research studies. KAN registry boxes were placed in 7 KAN member clinics across Kentucky to collect cards for interested individuals to complete. The registry cards contain personal contact, demographic, and disease/ condition diagnoses information.

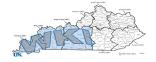
ResearchMatch is a national registry project (with nearly 93,000 participants) that links individuals with an interest in participating in research studies to researchers who are looking for people to participate in their studies. Participants can be queried by state (Kentucky currently has over 1,600 participants), demographics, medical conditions, medications, and other factors.

In an effort to build a larger, stronger registry, KAN is combining its efforts with the University of Kentucky Center for Clinical and Translational Science, whose staff maintain the Kentucky ResearchMatch. Individuals who enroll in the KAN registry will be contacted by Kentucky ResearchMatch staff and provided information about enrolling in ResearchMatch.

If you or someone you know is interested in joining the KAN Registry ResearchMatch, visit <a href="https://www.researchmatch.org/?rm=KAN">www.researchmatch.org/?rm=KAN</a>

#### Western Kentucky Initiative (WKI) Students Connect with Community Health Improvement Coalitions

The UK College of Medicine's Western Kentucky Initiative (<a href="http://meded.med.uky.edu/western-kentucky-initiative">http://meded.med.uky.edu/western-kentucky-initiative</a>) aims to provide a solution for the shortage of physicians in western Kentucky. Third-year medical students who are from the region participate in



this five-month, rural training track in one of three "hubs": Murray/Paducah, Bowling Green, and Owensboro. In addition to completing community-based clinical rotations in a variety of disciplines, the students also receive training about the foundations of Community Medicine prior to their WKI experience.

Each of the WKI hubs is home to vital health coalitions that came about through the Community Health Needs Assessment process as required by the ACA. As a result, leaders in each community now collaborate to maintain the momentum and actively work to improve health outcomes in their communities. Our medical students are able to attend coalition meetings and network with the key health care leaders who participate in this effort. The students become knowledgeable with the needs assessment reports and health outcomes data for their WKI hub. These experiences are vital and highlight the importance and impact of community medicine efforts, something that medical students do not typically experience in a traditional medical school curriculum.

#### Get Engaged with KAN and the Division of Community Medicine

We always hear the comment and question, "We are primary care, why should we be involved with research?" Our responses are always the same, "Because if we don't do it, no one will create the knowledge and evidence we need to practice the medicine our patients and communities expect and deserve from us"

Primary care providers have a vital role in advancing the knowledge of our professions. Practice-based research groups grew from the realization that much of the research that is done in tertiary medical centers has little applicability to the practice of outpatient and ambulatory medicine. KAN invites all its members to participate in research that will have little hindrance to, and may even benefit you in your daily practice. We welcome your ideas and engagement with the numerous resources and opportunities that we offer!

#### **Contact Us**

Give us a call for more information about our program and research.

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(859) 323-6713

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Visit us on the web at www.familymedicine.med .uky.edu/family-medicine-about-division-community -medicine

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