

"Never before in history
has innovation offered
promise of so much
to so many
in so short a time."

Bill Gates

PRESCRIPTION
FOR

health highlights

PROMOTING HEALTHY BEHAVIORS IN PRIMARY CARE RESEARCH NETWORKS

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10 PBRNs to Lead Practice Change

Ten of the country's PBRNs have been selected by the Prescription for Health National Advisory Committee to conduct 24-month studies to develop effective, practical strategies for changing Americans' unhealthy behaviors through primary care. This initiative, supported by both the Robert Wood Johnson Foundation and the Agency for Healthcare Research and Quality, awarded each PBRN \$300,000 and began July 1, 2005. Network researchers and their clinicians will attempt to understand and evaluate the extent to which more comprehensive health behavior counseling strategies are effective in improving the health behavior of people who visit their practices. These projects will concentrate on four leading health risk factors: lack of physical activity, unhealthy diet, tobacco use, and risky drinking, and will evaluate outcomes using a common set of patient, practice and expenditure measures. They will also assess strategies for reach, effectiveness, adoption, implementation, and maintenance. The 10 projects are:

AAFP NRN—American Academy of Family Physicians National Research Network—Wilson Pace, MD
"Improving Health Behaviors through Telephone Linked Care"—Integration of a proven, multi-component telephonic, interactive voice response behavior change intervention into primary care practices.

ACORN—Ambulatory Care Outcomes Research Network—Steven Woolf, MD, MPH
"Comprehensive Practice-Friendly Model for Promoting Healthy Behaviors"—To test whether a multi-faceted 5A intervention using an EHR can improve unhealthy behaviors in primary care adult patients.

CaReNet—Colorado Research Network—Perry Dickinson, MD
"Multiple Interactive Technologies to Enhance Care (MITEC)"—To further develop and assess an intervention using interactive internet and IVR technologies to assist patients with changing health behaviors.

CECH—Center to Enhance Child Health—Ardis Olson, MD
"Healthy Teens System Project"—To test a PDA screener system-wide designed to enhance screening, counseling, communication, referrals, and follow-up with the intention of improving behavior change.

GRIN—Great Lakes Research into Practice Network—Jodi Holtrop, PhD
"Connecting Primary Care Patients with Community Resources to Encourage Healthy Lifestyles"—Identify at-risk patients and refer them to an educator who counsels and connects to community resources.

NCFPRN—North Carolina Family Practice Research Network—Katrina Donahue, MD, MPH
"NC Prevention Collaborative: A Demonstration Project and Feasibility Study"—To promote screening, counseling, community resource use, and behavior change thru the health depart. and extension agencies.

NYC Ring—New York City Research and Improvement Networking Group—Diane McKee, MD
"Assessing Family Lifestyle Behaviors as a Means to Promote Healthy Habits"—To prevent unhealthy behaviors before they start (2 yo visit) by using a new tool to assess and address parent/family behavior.

OKPRN—Oklahoma Physician Resource/Research Network—James Mold, MD, MPH
"Systematic Delivery of Brief Behavioral Counseling in Primary Care"—Study the impact of benchmarking, training, community resources, PDSA cycles, and quality cycles on interventions for change.

PRENSA—Practice Research Network of San Antonio—Robert Ferrer, MD, MPH
"Engaging the Team: A Multilevel Program to Promote Healthy Behaviors"—To test a medical assistant-based program to link patients to interventions at the practice, health system, and community levels.

RAP—Research Association of Practices—Sue Flocke, MD
"Activating Primary Care and Community Resources for Health Promotion"—To test a practice-tailored intervention to ID at-risk patients and connect them to community resources and support using the Web.

Expenditure Study Update

Martey Doodoo and the NPO have continued to work on a strategy for estimating baseline and additional expenditures for implementation and for maintenance in each of the 10 projects. The next step is to formulate a generic table with instructions/definitions necessary to adequately complete this table. Martey should have a draft of this document ready to post on PBRNet in late September for feedback. We will not attempt to identify true costs to patients, opportunity costs, nor will we attempt to measure motivation—all have been deemed too complicated for this initiative. Revisions will be made relative to feedback received, and then Martey will craft a revised document in October for another review by the innovators and P4H partners. The NPO will then create a proposed document and instructions for inclusion in the January meeting notebook for finalization of the protocol

PBRNet

Why use this extranet? Because it is a terrific tool that reflects AHRQ's commitment to building the capacity of PBRNs. It solves important data collection and communication issues that previously required large amounts of time and effort by networks and practice personnel. It is a secure room for P4H innovators to facilitate communication, document sharing, and collaboration within funded PBRNs, the NPO, and the A-Team. If you haven't already done so, you will need to contact Steve Bernstein sbernste@ahrq.org to set up a username and password so you can access PBRNet. You will want to check this site periodically for P4H updates and postings. To link to PBRNet, click here: <http://extranet.ahrq.gov/health>

RefWorks

RefWorks is a web-based bibliography and database manager software that allows users to create their own personal database of important references from text files or online databases. Prescription for Health has imported references relevant to health behavior change counseling in primary care. The database will be updated periodically with new references. Suggestions for new references can be sent to healthy.behaviors@uchsc.edu

To access RefWorks go to: <http://www.refworks.com/rwsingle>

- Group code: RWAgencyHRQ
- Click the "Go to Login" button, enter P4H
- Enter the Password: P4H (none of the above are case-sensitive)

P4H Round 1 Findings

Lessons and insights gleaned from Round 1 P4H projects can be found in the *Annals of Family Medicine* May/June 2005 Supplement at http://www.annfammed.org/content/vol3/suppl_1/index.shtml

January Innovators Meeting

Scottsdale Resort and Conference Center will host the January 5-7, 2006, Innovators Meeting. You're sure to enjoy this southwest getaway come January. The Camelbacks and sunsets are legendary here. The meeting will begin with a reception/meeting the evening of Thursday, January 5th and wrap up with lunch Saturday, January 7th. We look forward to seeing the project PIs and up to two representatives from your study team. Look for registration and initial meeting materials in early October.



P4H Calendar

December 21, 2005
6-month progress report due

January 5-7, 2006
2nd Innovators Meeting
Scottsdale Resort and Conference Center,
Scottsdale, AZ

July 14, 2006
12-month annual report due

Sept. 13-15, 2006
3rd Innovators Meeting
Location TBA

January 3, 2007
18-month progress report due

May 23-25, 2007
4th Innovators Meeting
Cheyenne Mountain
Conference Resort,
Colorado Springs, CO

June 30, 2007
Round 2 grants conclude

July 13, 2007
24-month final report due



July 2005 Innovators Meeting