Collaborating with Community-based Practices and Networks: A Guide for Researchers

Community and Practice Research (CPR) Program
Oregon Clinical and Translational Research Institute

Practice-based Research

Many health care practices in Oregon are interested in research collaboration. Each practice is unique in the types and breadth of services it provides, the kinds of research it is interested in, and its expectations for researchers interested in collaboration. The **Community and Practice Research** (CPR) program of OCTRI can help researchers:

- understand and comply with expected processes
- find clinicians with related interests
- find practices that may want to collaborate
- refine practical study designs responsive to practice interests
- help determine the feasibility of a study.

Factors to consider when pursuing practice-based research

1. Most important, practices and organizations are businesses whose primary mission is the delivery of health care. They are often interested in participating in research if it enhances rather than detracts from this primary mission. Thus, they are most likely to be willing to participate if the research:
   - addresses important health issues faced by the clinics
   - only minimally disrupts the clinical operations
   - tests an intervention or system improvement that is likely to substantially improve health outcomes
   - does not adversely affect the business outcomes of the practice
   - includes them in the planning and evaluation from the beginning

2. In most cases busy practices are not particularly interested in helping recruit participants to a study if that is the extent of their involvement. The possible exception is if the study directly addresses an issue of great importance to the practice (e.g., health disparity in conditions common to populations served in safety net health clinics).

3. Budgeting for the expenses of the practice is complex and generally cannot be done as an offer to pay salary-related costs for the direct hours of the participating staff. When considering participation in research studies, practices weigh the value of participation (e.g., the improvement in quality of care) against two types of expense:
   - Replacement Costs - it is virtually impossible to find a replacement for, say, the 10% of time a study requires for research activities, and if lucky enough to do so, the amount of time and expense required for training, orientation and compliance would be very high.
   - Revenue Reduction – the loss of revenue resulting from removing a provider from direct patient care is significant and must be considered by any study proposing to implement within a practice setting.

4. Practice-based research is likely to take more time to plan and implement than research confined to academic settings. Commitment and approvals are needed from practitioners and operations directors of the participating organizations. They will look at the fit of the proposed research with the mission and demands of the practice. Because these personnel generally must fit research activities into off hours, approvals or reviews are unlikely to be accommodated on a short timeline. Planning well in advance and developing trusting relationships over time is critical to success.

Practice-Based Research Networks

Following are some local Practice-Based Research Networks (PBRNs) that may be of interest to researchers. Click on each or scroll down to see Practice and Research Network descriptions, instructions for conducting research with the network, and contact information. Please check back – we will continue to add additional networks.

Kaiser Foundation Health Plan of the Northwest (KPNW)

Practice Network Description: KPNW is a group model health maintenance organization and comprehensive health delivery system with about 450,000 members in Northwest Oregon and Southwest Washington. KPNW has a comprehensive electronic health record (EHR) system that maintains comprehensive practice management and medical record information on all of its membership. Because KPNW uses the EHR as a clinical tool for improving care, researchers can study the translation of rigorously controlled research findings into practice and evaluate population-based improvements in health outcomes.

Research Network: The Center for Health Research (TCHR)
http://www.kpchr.org/public/default.aspx

TCHR is a professionally independent research center that has offices within Kaiser Permanente medical plans in the Northwest, Hawaii and Georgia. TCHR pursues a vigorous agenda of patient-centered, population-and practice-based research. Although TCHR investigators conduct research on populations served in the three associated regions of Kaiser Permanente (991,000 members), much research is also conducted in collaboration with networks throughout the country such as the HMO Research Network (HMORN) - http://www.hmoresearchnetwork.org. This allows TCHR researchers to work with varied research populations and in a full spectrum of settings from urban centers to small towns and rural communities.

To Conduct Research in KPNW:

Any investigator interested in conducting research in KPNW should contact the OCTRI Front Door at FrontDoor@kpchr.org or *503-335-3934.*

Front Door staff will assess the nature of the request and inform the investigator of services that can be provided. All research proposals intending to conduct interventions within KPNW, on KPNW members, or in collaboration with KPNW, Northwest Permanente or Permanente Dental Associates require a collaborating investigator from TCHR. The Front Door staff will help find a collaborating TCHR investigator and make connections with the clinical departments that would be involved in the research. Many of the services provided by the Front Door can be provided at no cost; however, some have charges associated with them. A brief summary of the services that can be arranged by the Front Door is detailed in the table below.

Stage of Project	Service	OCTRI funded	Funding Required?
Feasibility/Protocol Development	Identifying collaborators • Scientific/clinical collaborators • Sponsors	√	
	Feasibility Assessment • Preparatory to research data analysis • Non-binding resource estimates	√	
	Compliance • Consultation services	√	
	Protocol development assistance • Customize existing protocols to KPNW environment • Assist researchers in developing ideas into testable research hypotheses	√	√
Project Review & Proposal Development	Budget preparation (binding estimates)	√	
	Obtain KPNW organizational review	√	
	Proposal management support	√	
Project Implementation	IRB applications • Provide consultation on IRB submission • Prepare initial IRB submission (Initial Review Questionnaire)	√	√
	Project management support		√
	Direct study support (e.g. study nurses, chart abstractionists, research analysts)		√

After an assessment by the Front Door, the investigator may be connected to one of several programs that have been created to guide external investigators through the steps for conducting research in the KPNW system.

Oregon Rural Practice-based Research Network (ORPRN)

http://www.ohsu.edu/orprn/

Practice Network Description: The ORPRN network includes 152 clinicians and 47 primary care practices that serve about 220,000 patients in 37 rural Oregon communities. ORPRN is an registered PBRN with the Agency for Healthcare Research and Quality, and one of six PBRNs nationally that have received Master Contracts from AHRQ approving them to bid on AHRQ-issued "task orders." These research or quality improvement projects will range in scope and may include preventive care, methods of diagnosing/treating common conditions, health care for priority populations, health information technology, readiness for emerging public health problems, and the coordination and delivery of primary care.

As with most rural health settings, family medicine clinicians (88%) comprise the majority of the network with smaller representation by practitioners of general internal medicine and pediatrics. The network is multidisciplinary with a 66%/34% mix of physician and non-physician clinicians (e.g. nurse practitioners, physician assistants). Sixty percent of the practices are private businesses with a median personnel size of 3 clinicians and 8 clinic staff. The practices include patients of all ages with 24% age 14 years or younger and 26% age 65 or older.

Research Network: ORPRN is a statewide network of primary care clinicians, community partners, and academics dedicated to studying the delivery of health care to rural residents and research to reduce rural health disparities. The mission of Oregon Rural Practice Research Network is to improve the health of rural population in Oregon through conducting and promoting health research in partnership with the communities and practitioners we serve.

ORPRN has an experienced staff of investigators, project managers and research coordinators. ORPRN's masters-trained regional research coordinators are available to implement studies from their rural locations throughout the state. Their already-established relationships with rural clinics and clinicians and their shorter-driving distances to rural sites increases the productivity and reduces the costs associated with rural-Oregon research.

Overall, ORPRN investigators and staff are available to assist researchers with a wide variety of study-related activities, including:

- Study design
- Clinic, clinician and patient recruitment
- Grant writing and editing
- Budget development, grants account management, contracts development
- IRB application and assurances
- Research/project coordination and research staff management
- Data collection, including implementing clinical subject-related protocols, focus groups, key informant interviews, chart abstraction, and surveying
- Data entry and data management
- Data analysis and statistics
- Literature reviews
- Manuscript assistance and editing

To Conduct Practice-based Research in ORPRN:

Researchers interested in conducting research in collaboration with ORPRN and its network practices should contact:

Oregon Rural Practice-based Research Network
Mail Code: L222
3181 SW Sam Jackson Park Road
Portland, Oregon 97239
(503) 494-0361
Fax: (503) 494-1513
www.ohsu.edu/orprn

Also, the people below would be happy to consult with potential researchers about research projects :

Director- **Lyle Fagnan, MD**, 503-494-1582 ; fagnanl@ohsu.edu
Research Director- **Cynthia Morris MPH, PhD**, 503-494-3262; morrisc@ohsu.edu

Safety Net West (SNW) Practice-based Research Network and OCHIN

Practice Network Description: Safety Net West (SNW) is made up of 23 public and non-profit organizations in Oregon, California and Washington that operate over 150 clinics serving about 400,000 patients. OCHIN provides an integrated, centralized electronic health information network infrastructure for all 23 SNW organizations, and acts as the administrative home for Safety Net West. Almost 40% of patients served in the OCHIN system are uninsured, a large proportion of whom are racial and ethnic minorities.

Research Network: While independent entities, the partnership between SNW and OCHIN presents significant opportunities for health services and public policy research. OCHIN is a unique, non-profit Health Center Controlled Network that provides support to safety-net primary care clinics by developing a common practice management and electronic medical record health information system. The system is adapted to meet the unique needs of FQHCs that care for indigent, uninsured and underinsured populations. OCHIN has one of the largest databases in the country on ambulatory care health services provided to the uninsured.

SNW is a primary care research network registered with the Agency for Healthcare Research and Quality (AHRQ). It consists of the Federally Qualified Health Centers (FQHC) and related organizations that are members of OCHIN. The mission of Safety Net West (SNW) is "to improve the health of underserved populations, enhance their quality of care, and inform health policy through research." SNW is especially interested in collaborating on studies that examine effective interventions and delivery systems improvements that meet the following priorities:

- Understand and address health conditions common in safety net populations with known health disparities;
- Have potential for improving health outcomes in these populations;
- Evaluate interventions that have the potential to improve safety net practice;
- Test health IT interventions to improve population health;
- Are consistent with evidence-based practices.

To Conduct Practice-based Research in Safety Net West and OCHIN: Investigators interested in conducting studies within the clinics of SNW should contact the network director early in the process: Mark Spofford, PhD, Director (phone: 503-335-6334; e-mail: mark.spofford@kpchr.org).

SNW has a formal method for investigators to submit research proposals for consideration. This includes an abstract summarizing the proposed study and an application form. These procedures and application form are included with this guide as Attachment A and Attachment B.

Decisions regarding support are based on the following criteria:

- fit with SNW mission and priorities
- feasibility of implementation within the SNW clinics
- extent to which the study includes SNW practitioner(s) as key staff/co-investigator.

To Conduct Data-Only Studies in OCHIN: OCHIN encourages data-only studies using the OCHIN database to answer important public policy questions. Because the database includes significant utilization, service and clinical data on uninsured populations in 3 states, the value of the data to inform health policy is tremendous. Application procedures are the same as for SNW; however, the review process includes an extra step. To ensure that the interests of all OCHIN members are protected, after approval by the Research Review Committee of SNW, the proposal will be reviewed by the Data Stewardship Committee of OCHIN.

Attachment A

Safety Net West
Research Review Process

1. To request network participation in a study each investigator will submit to the Research Review Committee (RRC) (a) the Safety Net West (SNW) Proposal Request Form (PRF; attached), and (b) a one-page abstract. The abstract should briefly summarize:
    a. The research question
    b. The aims of the study
    c. The study design and methods
    d. The recruitment plan
    e. The data to be collected and how it will be collected
    f. The approximate time frame of the study
2. Proposal request materials should be sent to the RRC at least one week in advance of its monthly meeting. None will be accepted without a minimum of 3 work days prior to the scheduled meeting. Materials must be submitted in electronic format to Mark Spofford, PhD at mark.spofford@kpchr.org who will screen for completeness and congruence with SNW mission and priorities. If clarification is needed, he will contact the Principal Investigator identified on the PRF, make modifications as agreed, and then distribute them electronically to PRC members, copying the Proposal PI on the communication.
3. The RRC will approve the proposal, request additional information, or reject the proposal. Criteria for review include:
    a. Fit with mission and purpose and priority research interests of SNW which include:
        1. conditions common in populations served
        2. conditions with known health disparities
        3. potential for intervention to improve health outcomes
        4. potential for intervention to improve safety net practice
        5. consistency with known best practices
    b. Feasibility of project implementation in safety net clinics.
    c. Potential disruption to clinic operations.
    d. Funding potential.
    e. Opportunity for involvement of SNW provider as co-investigator/consultant
4. An RRC representative will communicate the outcome of the RRC deliberations to the proposal PI within one week of the monthly meeting.
5. If approved the RRC will distribute abstract and PRF to SNW clinics with its endorsement and contact/follow up information for members who choose to participate
6. RRC will maintain a database of approved proposals and names of members who choose to participate in each proposal

Attachment B

Safety Net West Proposal Request Form

1. **Project Title:**_____
2. **Principal Investigator:**_____
   a. Affiliation:_____
   b. Department:_____
   c. E-mail:_____
   d. Phone #:_____
3. **Co-Investigators (Name, Affiliation):**_____

   _____
4. **Does the proposal include an SNW provider and/or OCHIN staff as Co-Investigator?**

   If so, name._____ **If not, would you like one?** ☐ **Yes** ☐ **No**
5. **Proposed SNW Clinics for Participation (both boxes can be checked if investigator wants assistance identifying additional clinics/providers to participate in study**

☐ Don't know. I would like SNW assistance in identifying

☐ I have already have agreement with SNW clinics/providers about participation (List clinics and contact)

_____

Please check box in front of each clinic you would like to include in research (check all that apply)

☐ Oregon ☐ California ☐ Washington
☐ Rural ☐ Urban
☐ Primary Care ☐ School-based ☐ Dental ☐ Homeless ☐ Specialty (specify)

_____

If specific organizations/clinics are desired, please specify._____

_____

_____

6. **OCHIN Health Information Requirements**

☐ HIPAA Limited Data Set only (OCHIN Approval only)
☐ Practice Management PHI only ☐ EHR PHI data only ☐ Both PM & EHR with PHI (if identified data, approval of all involved clinics/organizations is needed.).

7. **Requested involvement of clinics (check all that apply)**

☐ Passive recruitment (flyers, brochures, etc.)
☐ Active recruitment – provider referral
☐ Active recruitment –query & PCP letter
☐ Active recruitment – screening & consent
☐ Clinic as patient intervention site
☐ Clinic as provider/team intervention site
☐ Clinic as randomization unit
☐ Clinic data only

☐ Clinic staff to collect outcome data ☐ Other (describe)

8. Does the proposed study fit priorities of SNW research (check all that apply)

☐ Chronic Disease
☐ Mental Health/Addictions
☐ Obesity
☐ Chronic pain
☐ Patient-Centered Care
☐ Health Disparities
☐ Primary Care Delivery Systems
☐ Preventive health
☐ Health Literacy
☐ Primary Care Access

Please attach an abstract of your proposed study briefly summarizing your proposed research question, aims, design and methods, recruitment plan, and data to be collected. Please make sure to address the following information:

- **The number of research participants desired**
- **Are vulnerable populations targeted? (identify)**
- **The study-related procedures or services that are to be performed at the participating clinics and whether the study considers the procedures part of routine care for which the clinics/patients are responsible or a research investigation for which the study will pay for or provide staff to provide.**
- **The projected impact of the study on clinic operations and staff**
  - Duration of study
  - Space requirements,
  - Provider and/or support staff time
  - Lab/pharmacy
  - Estimated time/visits required from each participant
  - Total duration of participant/patient commitment
  - Training
- **Summary timeline of proposed study (start and end dates, etc.)**_____

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Signature of Principal Investigator **Date**

_____

Printed name of Principal Investigator

E-mail form and abstract to Safety Net West c/o mark.spofford@kpchr.org