

**DEPARTMENT OF FAMILY MEDICINE  
RESEARCH DIVISION MONTHLY REPORT  
DECEMBER, 2007**

**Research – Benjamin Crabtree, PhD**

The vision of the UMDNJ-RWJMS Family Medicine Research Division is to develop and sustain a nurturing and productive research environment that fosters collaborative transdisciplinary approaches to promote the health of families and communities by improving quality of care and eliminating health-related disparities.

**Message from the Director:**

**David Loxterkamp**, a family physician from Belfast, Maine, was hosted by Dr. John Scott for several days in December. His stories and essays have appeared in the New England Journal of Medicine, Journal of the American Medical Association and the British Medical Journal. He has written popularly for America Magazine, Commonwealth and the Boston Globe Sunday Magazine. His work as a family physician was the subject of a Life Magazine photo essay in 1998 and an NBC Nightline documentary in 2000. He has authored *A Measure of My Days: The Journal of a Country Doctor* (University of New England Press, 1997) and contributed to two anthologies, *A Life in Medicine*, edited by Robert Coles and Randy Testa (The New Press, 2002) and *Professions of Face*, edited by James Martin and Jeremy Langford (Sheed & Ward, 2002). He is currently writing a book on pilgrimage. At one of our weekly research division meetings he presented “Creating Optimal Healing Environments in Primary Care Practices.”

**Jesse Crosson** and **Fred Kobylarz** also made presentations at the Division’s weekly meetings. Dr. Crosson presented an overview of TRIAD findings to date as well as available TRIAD data sources. The purpose of the presentation is to encourage Research Division members to identify potential paper topics using TRIAD data. Procedures for paper approval and authorship determination were also discussed. TRIAD is a national multi-center study funded by CD and NIDDK designed to determine how managed care systems influence the processes and outcomes of diabetes care. TRIAD includes six TRCs. The title of his presentation was: "TRIAD: Translating Research into Action for Diabetes - Discussion of Potential Collaborations." Dr. Kobylarz gave an overview for the development of his grant proposal entitled "Understanding the Eden Alternative in Nursing Homes". The grant will be submitted to the Alzheimer's Association in January 2008.

**Deborah Cohen** made a presentation to the CINJ Population Science Program on “Constructing Teachable Moments: One strategy for delivering health behavior advice during primary care illness visits.” This collaborative program of research seeks to understand more effective strategies for facilitating healthy lifestyle change related to cancer and chronic disease.

**Shawna Hudson, PhD** is one of 25 applicants selected from a pool of 125 to participate in the 3rd Annual Workshop on Behavioral Methodologies in Cancer Research for Underrepresented Investigators sponsored by the National Cancer Institute to be in March 2008 in San Diego, CA. Congratulations Shawna!

In December, **Dena O’Malley** and **Eric Shaw** coordinated and taught a three day facilitator training with a group of researchers (led by Michael Parchman, MD) at the University of Texas Health Science Center at San Antonio. Dr. Parchman has received R18 from NIDDK funding aimed at using the principles of MAP/RAP (Multi-method Assessment Process/Reflective Adaptation Process) to improve diabetes care in 40 primary care practices in Texas.

In mid-December **Benjamin Crabtree** initiated a new collaboration with researchers from the University of Ottawa in Ontario, Canada. Researchers Grant Russell and Robert Geneau have been funded by the Canadian Institute of Health Research to evaluate Canada’s new “Primary Health Care Renewal” policies, including Ontario’s promotion of a new organizational model that includes the formation and promotion of Family Health Teams (FHT). The FHT vision for primary care promises comprehensive

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patient-centered health care provided through interdisciplinary teams including physicians, nurse practitioners, nurses and other health care providers (such as dieticians and pharmacists). Dr. Crabtree has been advising the Ottawa team on effective evaluation approaches, especially for collecting and analyzing qualitative data.

As part of the AAFP funded Center for Research in Primary Care, **Benjamin Crabtree** participated in a writing retreat to disseminate findings from across the Center's collaborative sites (RWJMS, Case Western Reserve, U Colorado, U Texas Health Sciences Center San Antonio, and Lehigh Valley Hospital). Two manuscripts were submitted from this retreat, one to *Family Practice Management* that describes the dual organization in primary care and the other to the *Joint Commission Journal for Quality and Patient Safety* that summarizes key insights from across projects.

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**New Jersey Family Medicine Research Network (NJFMRN)  
2007 in Review & Looking Ahead to 2008**

2007 was an exciting time for the Network. Multiple investigators have submitted applications for various projects that will incorporate practices across the Network. Topics include but are not limited to hypertension, diabetes, EMR/EHR (electronic medical records/electronic health records), survivorship, obesity, social networking, pharmaceutical interactions in practices and pre-pubertal girls and their development.

Applications for project submissions can be obtained by going to the website at <http://rwjms.umdnj.edu/njfmrn> or contact the office at 732-743-3387.

Network Practice Managers met 4 times over the year and were instrumental in assisting in the organization of the CEU (continuing education unit) nursing program. Meeting topics for the managers included: staffing issues, coding and billing, nurse/physician relationships, finances, stress management, 211-Info Line for Central Jersey, CINJ as a resource to practices, aging and updates on ULTRA and SCOPE.

Approximately 30 nurses from multiple practices participated in the first CEU Network program in September and the topic was cardiac medications. In November focus for the nurses was on asthma/COPD. Nurses receive 2 CEU's for each session they attend. The CEU calendar for 2008, including topics and registration form is available on the web at <http://rwjms.umdnj.edu/njfmrn>

Projects scheduled for 2008 are:

- ✚ A Randomized Controlled Trial of Controlled Breathing Effects on Ambulatory Blood Pressure. The project aim is to conduct a blinded, randomized controlled trial to test the effect of Guided Breathing Intervention in uncontrolled hypertensives.
- ✚ Organizational Self-Assessment to Improve Diabetes Care in Primary Care Practices. The study purpose is to test the feasibility of an organizational change intervention designed to improve adherence to evidence-based diabetes treatment guidelines in primary care by improving practice-level self understanding.
- ✚ An EMR Survey to pilot test a survey of EMR acceptance and use with clinicians in the New Jersey Family Medicine Research Network.

**Important NJFMRN dates for January, February and March are:**

Network Board will be meeting on January 31<sup>st</sup> at 7 PM

February 26<sup>th</sup> from 6 – 8:30 PM will be the CEU session on Prevention & Wellness given by Rita Musanti, PhD .

March 19<sup>th</sup> the Practice Managers will meet from 10 AM – 3 PM

March 25<sup>th</sup> the CEU focus will be on Psych Medications and the presenter will be Benjamin Chavez, PharmD

All the above meetings will take place at the Network office located at 1 Worlds' Fair Drive in Somerset.

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**Published**

A Ferrara, DF Williamson, AJ Karter, TJ Thompson, C Kim, for the Translating Research into Action for Diabetes (TRIAD) Study Group [**JC Crosson**]. Sex differences in quality of health care received by patients with diabetes in a managed care population. *Diabetes Care*, 2007;31:69-74.

**Hudson SV, Ohman-Strickland P, Cunningham R, Ferrante J, Hahn K, Crabtree BF.** The effects of teamwork and system support on colorectal cancer screening in primary care practices. *Cancer Detection and Prevention* 31, 5, 417-423.

**Orzano AJ, Scott J, Hudson S, O'Malley D, Hahn K,** Haywood-Harris S, **Falco T,** Johnson M, **Crabtree B.** Strategies for Conducting Complex Clinical Trials in Diverse Community Practices. *Medical Care*, Volume 45, Number 12, December 2007.

**In Press**

**Cohen, DJ & Crabtree, BF.** Evaluative Criteria for Qualitative Research in Health Care: Controversies and Recommendations. *Annals of Family Medicine*. (in press).

Brazeau, C.; Rovi, S.; Washington, J.; **Crosson, JC**; "Chronic illness care quality in preceptorship sites. *Teaching and Learning in Medicine*. 2007; 18, 4: (in press).

**JC Crosson, N Isaacson, D Lancaster,** EA McDonald, T Schueth, **B DiCicco-Bloom, JL Newman, DS Bell.** Variation in electronic prescribing implementation among twelve ambulatory practices. *Journal of General Internal Medicine*. (in press).

C-W Tseng, E. Tierney, RB Gerzoff, RA Dudley, B. Waitzfelder, TR Ackermann, AJ Karter, P Piette, **JC Crosson,** Q Ngo-Metzger, R Chung, CM Mangione Race/Ethnicity and economic differences in cost-related medication underuse among insured adults with diabetes. *Diabetes Care* (in press).

SL Ettner, BL Cadwell, LB Russell, A Brown, AJ Karter, M Safford, C Mangione, G Beckles, WH Herman, TJ Thompson, and the TRIAD Study Group [**JC Crosson**]. Diabetes self-care: do socioeconomically disadvantaged patients spend more or less extra time looking after themselves? *Health Economics* (in press).

**Echeverria SE,** Diez-Roux A, Shea S, Borrell L, Jackson S. Associations of neighborhood problems and neighborhood social cohesion with mental health and health behaviors. *Journal Health and Place* (in press)

**Ferrante JM,** Chen P, Kim S. "The Effect of Patient Navigation on Time to Diagnosis, Anxiety, and Satisfaction in Urban Minority Women with Abnormal Mammograms: a Randomized Controlled Trial," *J Urban Health*, 2007 (in press).

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**Ferrante JM**, Winston DG, Chen P, de la Torre A. Family Physicians' Knowledge and Screening of Chronic Hepatitis and Liver Cancer, *Fam Med*, 2007 (in press).

Hargro, L, **Ferrante JM**. Diarrhea. In: *Family Medicine: Ambulatory Care & Prevention*, 5th edition, Mengel and Schwiebert, eds, McGraw- Hill Companies, 2007 (in press).

**Hahn K, Ferrante J, Crosson J, Hudson S, Crabtree B**. Diabetes Flow Sheet Use Associated with Guideline Adherence *Annals of Family Medicine* (in press).

Natale-Pereira, A., Marks J, Vega MV, Mouzon DM, **Hudson SV**, and Salas-Lopez D. "Barriers and Facilitators for Colorectal Cancer Screening Practices in the Latino Community: Perspectives from Community Leaders." *Cancer Control* (in press).

**Ohman Strickland PA, Orzano AJ, Hudson SV, Solberg LI, DiCiccio-Bloom B, O'Malley D, Tallia AF, Balasubramanian B, Crabtree BF**. Association of diabetes care with presence of nurse practitioners and physician assistants in family medicine practices *Annals of Family Medicine* (in press).

**Orzano AJ**, McInerney CR, **Tallia AF**, Scharf D, **Crabtree BF**. A Knowledge Management Model: Implications for Enhancing Quality in Health Care *J American Society Information Science and Technology, JASIST*

**Orzano AJ**, McInerney CR, **Tallia AF**, Scharf D, **Crabtree BF**. Practice Performance and Knowledge Management: An Exploratory Analysis. *Health Care Management Review*.

**Under Review**

**Cohen, DJ, Crabtree, BF**. Integration of qualitative methods into clinical research: Emergent values regarding the rigor and quality. (under review *Annals of Family Medicine*).

**Crabtree BF**, Miller WL, McDaniel RR, Stange KC, Nutting PA, Jaen C. Thriving in an Unhealthy Environment: Building Adaptive Capacity in Primary Care. (under review *Joint Commission Journal for Quality and Patient Safety*).

**Crabtree BF**, McDaniel RR, Nutting PA, Lanham H, **Looney JA**, Miller WL. Moving Beyond the Dual Organization: Strategies for Creating the Medical Home. (under review *Family Practice Management*).

Sussman A, Williams RL, Leverence R, Gloyd PW, **Crabtree BF**. Using Self Determination Theory to Explain Clinical Decision making in Primary Care (under review *Journal of the American Board of Family Medicine*).

Phillips RL, Dryer M, Weyer SM, Guirguis-Blake J, **Crabtree BF**, McNellis R, Johnson-Pawlson J. The direct observation of nurse practitioners and physician assistants in primary care practice: are there differences and do they matter? (revisions requested *Annals of Family Medicine*).

M Heisler, B Tabaei, R Ackerman, KV Narayan, B Waitzfelder, M Safford, C Tseng, K Duru, **JC Crosson**, B Herman, C Kim. Physicians' participatory decision-making and quality of

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diabetes care processes and outcomes: results from TRIAD (under review Journal of General Internal Medicine).

CJ Wang, M Patel, AJ Schueth, M Bradley, S Wu, **JC Crosson**, PA Glassman, DS Bell. Effects of standards-based electronic prescribing systems on outpatient primary care practice: a physician survey. (under review Medical Care.)

Cappiello, M., **Cunningham, R. S.**, Knopf, M. T., & Erdos, D. (2006). Breast Cancer Survivors: Information and Support Needs After Treatment (submitted for review: Clinical Nursing Research).

**DiCicco-Bloom, B**, Frederickson K, **O'Malley D**, **Shaw E**, **Crosson J**: Concept Development: Social Capital Within a Complex Adaptive System Framework (under review Journal of Nursing Scholarship)

**DiCicco-Bloom B**, McDaniel R., **O'Malley D**, **Shaw E**, **Crosson JC**. The Expanded Jazz Metaphor: Relationships Among Members of a Family Medicine Practice, (under review Journal of Applied Behavioral Sciences).

Kim SH, **Ferrante JM**, Won B, Hameed MR. Black Race Is Independently Associated With Worse Outcome After Treatment For Breast Cancer, (under review Annals of Surgical Oncology).

Salas-Lopez D, Mouzon DM, Cespedes LM, McLaughlin C, **Hudson SV**, Natale-Pereira A. Evaluation of a Medical Interpreter Training Program for Bilingual Dual-Role Hospital Employees (under review Journal of General Internal Medicine).

**Hudson SV**, **Ohman-Strickland PA**, **Ferrante JM**, Lu-Yao G, **Orzano AJ**, **Crabtree BF**. Prostate Cancer Screening among the Elderly in Community-Based Family Medicine Practices. (under review Annals of Family Medicine).

Fyffe D, **Hudson SV**, Fagan J, Brown D. Knowledge and Barriers Related to Prostate and Colorectal Cancer Prevention in Underserved Black Men. (under review Journal of the National Medical Association).

**Scott, JG**, **Cohen, D**, **DiCicco-Bloom, B**, **Crabtree, BF**, Stange, K, Miller, W, Understanding Healing Relationships in Primary Care (revisions requested Annals of Family Medicine).

**Shaw E**, **DiCicco-Bloom B**, **Crosson JC**, **Looney JA**, **O'Malley D**, **Crabtree BF**. Understanding Family Relationships in Family Medicine Practices. (under review JGIM).

**In Process**

**Balasubramanian BA; Ohman-Strickland P; Crabtree BF**. Using Learning Teams for Reflective Adaptation: Results from a Quality Improvement Intervention to Improve Adherence to Guidelines for Diabetes and Hypertension in Primary Care Practices.

**Balasubramanian BA, Orzano AJ, Ohman Strickland P, Hudson SV, Tallia AF, Crabtree BF**. The impact of a quality improvement intervention in primary care practices on staff

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turnover.

Parchman ML, McDaniel RR, **Crabtree BF**. Methodological implications of complexity theory for studying clinical microsystem redesign.

**Crosson JC, Ohman-Strickland P, Hahn K, Bass C, Shaw E, O'Connell ME, Crabtree BF**. Divergent views of physicians and staff regarding decision-making in family medicine practices.

**Crosson JC, DiCicco-Bloom B, Shaw E, O'Malley D, Crabtree BF**. Electronic medical records and adherence to diabetes guidelines in primary care: a multimethod comparative case study.

C Brazeau, **JC Crosson**. Observation of teaching in a third year clerkship: the hidden curriculum of patient care.

MS Johnson, S Rovi, **JC Crosson**, L Boyd. Offsite mentors program: an approach to increasing research capacity.

Cunningham, R., Anselmo-Murphy, A., & Vamos, D. (2007) The role of erythropoietic agents in elderly cancer patients receiving chemotherapy. (for submission to *Drugs and Aging* in June).

**Cunningham, R. Shaw, E., Hudson, S., O'Malley, D., & Crabtree, B.** Using Learning Collaboratives to enhance Colorectal Screening.

**DiCicco-Bloom B, O'Malley D, Shaw E, Crosson JC, Bass C.** Frederickson, K. The development of the concept social capital within the complexity science framework.

**Echeverria SE** and Diez-Roux A. "Emergent Chronic Conditions" In an upcoming book, "Social and Structural Factors Affecting the Health of Latino Males". Aguirre-Molina M, Borrell L, and Vega W (Eds).

**Echeverria SE** and Rhodes G. The influence of area of residence on advanced-stage breast cancer among Black, Latina and White women living in New Jersey. Research proposal submitted to the New Jersey State Cancer Registry. Pending IRB approval.

**Ferrante J, Ohman-Strickland P, Hahn K, Hudson S, Shaw E, Crosson J, Crabtree B.** Self-Report Versus Medical Records for Assessing Preventive Services Delivery.

**Hudson SV, Ohman-Strickland P, Ferrante J, Young D, Hahn K,** Harris-Haywood S, **Crabtree BF**. Organizational Factors Associated with Cancer Screening Disparities in Primary Care Settings.

Jodi Holtrop, **Nicole Isaacson**, Maribel Cifuentes, Trissa Torres, An analysis of conditions for enacting role change in primary care practices *American Journal of Preventive Medicine*.

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Jodi Holtrop, **Nicole Isaacson**, Maribel Cifuentes, Trissa Torres, CHERL: A new role for primary care.

**Lancaster D, Crosson JC, Isaacson, N.** Clinical support staff involvement in prescribing.

**Looney JA, Shaw E, Chase S, Stello B, DiCicco-Bloom B, Navalekar R, Crabtree BF.** Passing the Torch in Quality Improvement Trials.

**Looney JA, O'Malley D, McDaniel RR, Cho JJ, Nutting P, Miller W, Crabtree BF.** Leaders and Leadership in the Primary Care Setting: Seeking a New Paradigm.

**Scott JG, DiCicco-Bloom B, Stello B, Crosson JC, O'Malley D, Shaw E, Bass C, O'Connell ME, Solberg L, Gilchrist V, Jaen C, Crabtree BF.** The Influence of pharmaceutical representatives on adherence to guidelines for treatment of hypertension.

**Scott JG, DiCicco-Bloom B, Stroebel C, Stello B, Crosson JC, O'Malley D, Shaw E, Bass C, O'Connell ME, Solberg L, Gilchrist V, Jaen C, Crabtree BF.** Food for thought: How Pharmaceutical Representatives Influence Primary Care Physicians.

**Shaw E, Looney JA, Chase S, Stello B, Navalekar R, Crabtree BF.** In the Moment: An Analysis of Facilitator Impact during a Quality Improvement Process.

**Tallia A, Scott JG, DiCicco-Bloom B, Orzano AJ, O'Malley D, Shaw E, Crosson JC, Crabtree B** Comparison of Genograms and Social Network Diagrams in the Analysis of Primary Care Practices.

### **Invited Presentations**

**Dena O'Malley** and **Eric Shaw, PhD** held a facilitator training with a group of researchers (led by Michael Parchman, MD) at the University of Texas Health Science Center at San Antonio. Dr. Parchman has received R01 funding aimed at using the principles of MAP/RAP (Multi-method Assessment Process/Reflective Adaptation Process) to improve diabetes care in 40 primary care practices in Texas.

**Shawna Hudson, PhD** is one of 25 applicants selected from a pool of 125 to participate in the 3rd Annual Workshop on Behavioral Methodologies in Cancer Research for Underrepresented Investigators sponsored by the National Cancer Institute to be in March 2008 in San Diego, CA.

**Debra Lancaster** was invited to attend the *4<sup>th</sup> Annual Labor-Management Partnership Conference, Quality Health Care, Jobs and Competitiveness: The Role of Labor Relations* held at the Labor Education Center in New Brunswick on November 30<sup>th</sup>. The conference presented the opportunity to network with government officials, policy makers and researchers as well as representatives of large employers in New Jersey. Topics included health care reform in NJ, and state of health care delivery in U.S.

### **Grants/Contract Related Activities**

#### **Active Grants**

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**Clemow, Lynn PI: “RCT of Controlled Breathing Effects on Ambulatory BP” National Heart, Lung, and Blood Institute. Ro1 HL083056-01A2; 2007 – 2012. Total project costs: \$3,796,669.**

*The goal of the project is to test the efficacy of a guided breathing intervention on ambulatory blood pressure in hypertensive patients drawn from primary care and specialty hypertension practices.*

**Cohen, D., PI: “Using illness visits to address health behavior advice” National Cancer Institute with CWRU (subcontract); 2004 - 2008; total project subcontract costs: \$150,419.**

*This subcontract provides support for conversation analysis in a study which seeks to characterize the way a teachable moment arises and is constructed within physician-patient interaction and to evaluate the effectiveness of this strategy on patient recall of advice, motivation to modify behavior and change in health behavior.*

**Cohen D., PI: Prescription for Health Independence Evaluation Unit. Robert Wood Johnson Foundation; 2004 - 2009; total project costs: \$963,576.**

*This multiyear project is performing an ongoing content and process analysis of Robert Wood Johnson Foundation funded projects submitted by Practice Based Research Networks to the Prescription for Life: Promoting Health Behaviors Initiative. Methodologies include a comparative case analysis of projects, built on qualitative and quantitative data collected at the initiative, project, and practice levels.*

**Crosson, JC, Co-PI: Translating Research into Action for Diabetes II (TRIAD II). Centers for Disease Control and Prevention/National Institute for Diabetes and Digestive and Kidney Diseases (U58/CCU223529). 2004 - 2009; total award \$4,275,000.**

*Translating Research Into Action for Diabetes (TRIAD) is a national multi-center study that was created to determine how managed care systems influence the processes and outcomes of diabetes care. The study will describe and evaluate the quality of care and life among people with diabetes through the help from ten health plans and sixty-six provider groups.*

**Crabtree BF, PI: Trial to Enhance Adherence to Multiple Guidelines. National Heart, Lung, and Blood Institute; 2002 – 2008; total project costs: \$3,722,849.**

*The major goal of this grant is to test a tailored practice level intervention strategy to simultaneously improve the delivery of care for diabetes, hypertension, and asthma and for tobacco and cholesterol screening. A group randomized clinical trial of practices is being used to test the intervention.*

**Crabtree, BF, PI: “Enhancing Colorectal CA Screening Through Learning Teams,” National Cancer Institute; 2005 – 2010; total project costs: \$2,997,356.**

*This study evaluates a tailored practice-level MAP/RAP intervention that seeks to enhance relationships among practice members in order to improve rates of colorectal cancer screening in primary care practice.*

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**Crabtree, BF, PI: “New Jersey Family Physicians Research Network – Cancer Center Support Grant”, 2005 – 2010; total project costs: \$806,348.**

*This work supports the NJFPRN to offer investigators an opportunity to have direct access to community-based patients and physicians in order to translate research evidence into community-based primary care practices with a long-term vision of enhancing the quality of care patients receive in New Jersey.*

**Crabtree BF, (subcontract): "The TransforMED National Demonstration Project", American Academy of Family Physicians; 2006 - 2009; total project costs: \$138,977.**

*This subcontract is part of a national project which will demonstrate new knowledge about practice change; payer, patient and practice outcomes using a detailed multi-method assessment of the process of practice change in selected practices across the United States.*

**DiCicco-Bloom, B., PI: Institutional National Research Services Award (T32). Health Resources and Service Administration, 2003 – 2008; total project costs: \$1,319,174.**

*The NRSA fellowship seeks to produce researchers who: 1) are knowledgeable about national, state, and local health promotion and disease prevention; 2) are capable of investigating the appropriateness, effectiveness, and quality of health care in primary care settings; and 3) contribute to ongoing clinical and health policy research.*

**Ferrante Jeanne, PI: “Breast and Cervical Cancer Screening in Obese Women”, NIH/NCI, 1 K07 CA101780-01A2 Dates: 2005 - 2009, Amount funded: \$522,000 [direct], \$563,760 [total].**

*The objectives of this multi-method research project are to quantify the extent of the association of obesity to delayed cancer screening, identify patient and physician barriers to cancer screening in obese women, and develop an interventional plan and materials to increase cancer screening in obese women.*

**Ferrante Jeanne, PI: "Sister to Sister Navigator Program" (competing continuation) Susan G. Komen Foundation North Jersey Affiliate Dates: 2007 - 2008, Amount funded: \$50,000.**

*The objective of this project is to determine the effectiveness of a breast health patient navigator in helping women overcome barriers in obtaining breast cancer screening, diagnostic, treatment, and follow-up services.*

**Hudson, S., PI: "The use of patient navigators in increasing enrollment onto breast cancer clinical trials," New Jersey Commission on Cancer Research; 2007 - 2008; total project costs \$14,000.**

*This grant will support Mafudia Bangura's (an MD/MPH student fellow) mentored training in health literacy and process evaluation for the academic year. She will identify barriers to patient enrollment in breast cancer clinical trials and assess whether patient navigation is an effective method of increasing accrual. Dr. Hudson is the primary mentor and PI for the grant.*

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**Hudson, SV (Evaluator): Susan G. Komen Breast Cancer Foundation North Jersey Affiliate, Education Grant, Use and evaluation of an ethnically-matched patient navigator to increase minority patient recruitment to breast cancer clinical trials, \$130,000, 2007 - 2009**

*This project seeks to increase participation by African Americans and Latinas in breast cancer clinical trials through use of an ethnically matched lay patient navigator at UMDNJ-NJMS and the University Hospital Cancer Center.*

**Hudson, SV (Evaluator): Susan G. Komen Breast Cancer Foundation North Jersey Affiliate, Education Grant, Moving Forward, \$130,000, 2007 - 2009**

*This project launches a new patient navigation program using an oncology nurse that educates eligible African American and Latino patients about cancer clinical trials and strives to enroll more minority and medically underserved patients in NCI clinical trials for breast cancer at Newark Beth Israel Hospital.*

**Hudson SV, Disparities Core Manager: "Cancer Prevention, Control and Population Science," RWJ Foundation; 2007 - 2011, total project costs \$12,000,000.**

*This grant will strengthen and expand the Cancer Institute of New Jersey's population science program in 1) Prevention and Control, 2) Cancer Survivorship, 3) Cancer Disparities, 4) Cancer Informatics and 5) Network Research (primary care and oncology). It will provide infrastructure and support for research studies and educational/outreach interventions statewide.*

**Hudson SV, Co-investigator: "Factors of Racially Disparate Breast Cancer Treatment," American Cancer Society, Research Grant# 07-291-01CPHPS, 2007 - 2011, total project costs \$669,000.**

*The specific aims of the study are to (i) determine if racial differences exist in the treatment of early breast cancer between African American and White women, (ii) examine differences in delays in diagnosis and treatment initiation for early breast cancer between African Americans and Whites and whether factors predicting delays differ between them, and (iii) examine factors influencing choice between mastectomy and breast conserving surgery plus radiotherapy for women with early breast cancer and whether these factors differ by race.*

**Hudson SV, Co-investigator: "Non-clinical factors in disparate treatment for early breast cancer," Susan G. Komen Breast Cancer Foundation, Research Grant, 2006 - 2009, total project costs \$248,926.**

*The study aims to explore the role of non-clinical factors in explaining racial disparity in the receipt of adjuvant chemotherapy. Specifically, the study will evaluate important factors at the patient, care process, and health system levels.*

**Hudson SV, Research Methodologist: "Addressing Disparities in Cancer Care for Latino Medicare Beneficiaries," Centers for Medicare & Medicaid Services, Demonstration Project, 2006 - 2010, Research Methodologist, total project costs \$2,852,878.**

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*This project evaluates whether an innovative facilitation program (targeting cancers of the prostate, colon/rectum, breast, and cervix) will improve cancer outcomes among Latino Medicare beneficiaries in the city of Newark, New Jersey. The goal is to reduce the disparities observed in screening, time to diagnoses and treatment services, by utilizing a multidisciplinary team approach to health care, incorporating systems thinking methodology.*

**Orzano AJ, PI: Capacity in Organizational Research, AHRQ (K08 HS014018) Career Development Award; 2004 – 2008; total project costs: \$435,219.**

*This grant supports a variety of educational strategies designed to make Dr. Orzano an expert in relevant organizational performance measure and to enhance his skills in survey and multimethod research approaches.*

**Roemheld-Hamm, B., PI: “National Needs Assessment: Problem Physician Early Warning System”, subcontract with National Board of Medical Examiners, Funding agency: Robert Wood Johnson Foundation; 2005–2007; Subcontract total costs: \$150,453.**

*A subcontract that seeks to develop an evidence-based early warning system to identify and remediate at-risk practitioners who are at a high probability of causing harm to the public.*

**Scott, JG, PI: Robert Wood Johnson Generalist Physician Faculty Scholars Program, “Balancing Priorities: Healing in the context of evidence-based medicine”; Robert Wood Johnson Foundation; 2004 – 2008; total project costs: \$300,000.**

*This grant supports Dr. Scott to explore how the doctor-patient relationship promotes patient healing.*

**Tallia, A.F., PI: “Academic Administrative Units in Primary Care”, 1 R18 DK067083-01A2, Health Resources and Services Administration; 2005 - 2008; total project costs: \$741,915.**

*The major goals of the grant are to: 1) develop a state-wide quality of care research network; 2) support a critical mass of family medicine researchers, and 3) build the infrastructure necessary to support and sustain network-based quality of care research and primary care practice improvement research productivity.*

**Crabtree, BF, (subcontract PI): “Using learning teams for reflective adaptation for diabetes”; NIDDK; 2005 - 2010 subcontract project amount: \$315,363**

*A subcontract with the University of Colorado (Paul Nutting, Principal Investigator) is comparing the magnitude and timing of the intervention effects with a state of the art quality improvement effort that focuses on diabetes.*

**Crabtree, BF, PI: "Practice Redesign to Improve Depression Care – PRIDE Care" (subcontract), Funding agency: NIMH; 2006-2010; Project total costs: \$167,732.**

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*This subcontract will assist the main study in a group randomized trial To evaluate a Chronic Care Improvement intervention for implementing and sustaining chronic care office systems to improve depression care in 36 small, semi-autonomous, mixed-payer community-based primary care practices.*

**Pending grant applications (submitted)**

**Crosson, JC, PI:** “Organizational self-assessment to improve diabetes care in primary care practices.” National Institute for Diabetes and Digestive and Kidney Diseases.  
R34 resubmission 7/16/07. Proposed dates: 4/1/ 2008 – 3/31/ 2010. \$468,000 (total award)  
This grant has received a score of 120.

*Purpose: To test the feasibility of an organizational change intervention designed to improve adherence to evidence-based diabetes treatment guidelines in primary care by improving practice-level self understanding.*

**Ferrante J (PI). "Sister to Sister Navigator Program" (competing continuation grant), April 1, 2008 - March 30, 2009, Susan G. Komen for the Cure North Jersey Affiliate, \$50,000.**

*The objective of this project is to determine the effectiveness of a breast health patient navigator in helping women overcome barriers in obtaining breast cancer screening, diagnostic, treatment, and follow-up services.*

**Ferrante, J., PI: Developing the Medical Home in Primary Care: Implementation of a Practice-based Patient Navigator”; UMDNJ Team Science Initiative; 2008 – 2009; total project costs: \$10,000.**

*This proposal will help supplement funding already obtained to conduct extensive qualitative analysis to gain real-time insights and understand the barriers and facilitators to the implementation and utilization of the patient navigator in the primary care setting.*

**Hudson, S., PI: "Life After Cancer: Examining Survivor Transitions from Specialist to Primary Care," National Cancer Institute; 2008 - 2012; total project costs \$566,452**

Update (September): This received a score of 169 and will be reviewed during the October council meeting for a funding recommendation.

Update (October): Resubmission on 11/9/07

*The overall goal of this career development application is to enable Dr. Hudson to become an independent researcher in cancer survivorship and primary care research. Using a combination of interviewing and survey research methodologies, the proposed studies build on each other to (1) explore early stage breast and prostate cancer survivors' attitudes toward primary care for follow-up cancer screening and (2) develop and validate a survey to be implemented in a study that describes primary care usage and assesses cognitive-affective, patient support and demographic factors that affect how survivors use specialists and primary care physicians for follow-up care.*

**Lancaster, DH, Co-Investigator: “Initiative on the Direct Care Workforce.” Submitted to**

**DEPARTMENT OF FAMILY MEDICINE  
RESEARCH DIVISION MONTHLY REPORT  
DECEMBER, 2007**

**the Rutgers, The State University of New Jersey, Academic Excellence Award Program.  
\$140,000. July 2008-Fall 2009.**

*The mission of the IDCW is to establish an interdisciplinary network of scholars whose research focuses on a range of industries employing direct care workers in order to encourage scholarly exchange and innovation and to facilitate research of interest to academics, practitioners and public policy makers. Eileen Appelbaum, Director of the Center for Women and Work and Prof. II at the School of Management and Labor Relations would serve as PI. Co-investigators would also include researchers from the Rutgers School of Social Work and the Graduate School of Education.*