

**DEPARTMENT OF FAMILY MEDICINE  
RESEARCH DIVISION MONTHLY REPORT  
SEPTEMBER 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:**

**Justin Wu, MD, MPH**, a Clinical Assistant Professor in the Department of Family Medicine, made a presentation to the Research Division on "Women Seeking Emergency Contraception via the Internet: A Mixed Methods Study." As Director of the RHEDI Program (Reproductive Health Education in Family Medicine), she is developing a training program for residents in evidence based, patient-centered, family planning and abortion services. Dr. Wu's areas of research and clinical interests are delivering abortion services within the context of primary care, emergency contraception, family planning and residency education. She received her medical degree from UMDNJ-New Jersey Medical School and completed her residency in Family Medicine at the University of Michigan. Following her residency, Dr. Wu completed a Women's Health Fellowship at UMDNJ-Robert Wood Johnson Medical School, Department of Family Medicine. Dr. Wu received her MPH at the University of Rochester and completed a Reproductive Health Fellowship during this time as well.

During the month of September, the Research Division continued to host CINJ Population Science members as speakers at the weekly Tuesday morning meetings. **Stephen Marcella, MD, MPH** is currently studying the metabolic syndrome and its effects on prostate cancer as well as screening for prostate cancer. His presentation on "Bone Mineral Density as a Prognostic factor in Outcome from Prostate Cancer" outlined his approach to understanding newly diagnosed prostate cancer and possible prognostic signs for survival outcome. He is also planning to collaborate with molecular biologists to study the long-term effect of estrogen on prostate cancer aggressiveness using bone mineral density as a surrogate marker for estrogen activity. **Kitaw Demissie, MD, PhD** has several years of experience in studying the epidemiology of asthma and cancer. Dr. Demissie's research interests include racial disparity in the treatment and outcomes of breast cancer as well as gene expression profiles in relation to environmental determinants. The title of his presentation was "Investigation of Causes for Higher Mortality among African American Breast Cancer Patients." **Elisa V. Bandera, MD, PhD** has extensive experience in epidemiology with a focus on the prevention of cancer by dietary means. Dr. Bandera is working with epidemiologists at the American Cancer Society in the CPS II Cohort Study, a PI in a case-control study evaluating the role of diet and DNA repair on ovarian cancer risk and a research on the onset of puberty in girls as a risk factor of breast cancer. She is currently leading The Jersey Girl Study, a pilot study evaluating a variety of environmental factors, including diet and physical activity in relation to puberty and a multi-site case-control study of breast cancer in New York and New Jersey which aims to evaluate risk factors for early age at onset and aggressive disease in African American and Caucasian women. The title of her presentation was "Nutritional Epidemiology of Cancer: My Current Efforts."

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In a continuation of our preparing for October's North American Primary Care Research Group (NAPCRG) Annual conference, Division members previewed their presentations or posters that have been accepted. In September, **Barbara DiCicco-Bloom** summarized her poster presentation: "Social Capital in Primary Care Practices: A Model to Improve Practice Performance." At other meetings **J. Anna Looney** presented "Leaders and Leadership in the Primary Care Setting: Seeking A New Paradigm," while **Jesse Crosson** presented "Effect of e-prescribing in ambulatory settings: evaluation of the formulary and benefit standard". Other September presentations included **Pamela Ohman Strickland** on "Effectiveness of Components of the chronic Care Model for Diabetes Care, Diet and Exercise Counseling, and Colorectal Cancer," **Denalee O'Malley** on "Implementing Advanced Access in a Complex Adaptive System: Implications for Family Medicine Practices," **Sandra Echeverria** on "Practice-level Factors Influencing Cancer Screening Services," and **Oliver Lontok** on "Resident Physicians and Family Medicine: Harmonious Fit or Uneasy Alliance?"

Members of the TransforMED Evaluation Team participated in a 3 day analysis retreat in Colorado in September to identify emerging themes from the evaluation of the AAFP's National Demonstration Project (NDP) of the New Model of Care. Participating in the retreat were **Ben Crabtree**, Paul Nutting, William Miller, Carlos Jaen, and Elizabeth Stewart. The NDP is a two-year implementation of the comprehensive set of recommendations that are hoped to be transformative in the delivery of primary care. The project has now been ongoing for 15 months and the evaluation team is able to document many successes, but also multiple challenges to organizational change, particularly in sustaining continuous change in the face of change fatigue and interfacing technology in diverse contexts.

**Deborah Cohen, PhD** participated in the Bi-Annual Robert Wood Johnson Foundation Evaluation Conference. The meeting was held in Princeton and convened researchers engaged in foundation-funded external evaluations and included evaluation related presentations and workshops, as well as a tremendous opportunity for networking. Dr. Cohen is currently heading a RWJMS team evaluating the RWJF's Prescription for Health Initiative.

Benjamin F. Crabtree, PhD  
Professor and Director

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**New Jersey Family Medicine Research Network (NJFMRN)**

Our thanks to Narjita Saik, PharmD, clinical pharmacist with the heart failure and transplant group at Robert Wood Johnson University Hospital in New Brunswick for her informative presentation to Network nurses on cardiac medications. The Network in collaboration with CINJ will be offering CEU programs on various topics to assist practice nurses in keeping their skills and credentials current.

Upcoming projects for the Network include:

- ✚ A Randomized Controlled Trial of Controlled Breathing Effects on Ambulatory Blood Pressure. Although drug therapies have improved blood pressure (BP) control, 50% of the hypertensive patients on drug therapy have inadequately controlled BP. The project aim is to conduct a blinded, randomized controlled trial to test the effect of Guided Breathing Intervention in uncontrolled hypertensives.
- ✚ Network practices will be participating in a pilot study of 100-150 girls, aged 9-10 years to assess the feasibility of establishing a larger study of pre-pubertal girls in New Jersey that will collect follow-up information on their development. Research studies have identified puberty as a critical window in a woman's development that has a major impact on her future risk of developing breast cancer. This pilot focuses on environmental exposures, hormonal, and nutritional factors.

25 practices are participating in **SCOPE – Supporting Colorectal Outcomes Through Participatory Enhancements**, a project funded by the NCI. The purpose of SCOPE is to facilitate primary care practices to improve colorectal screening rates for their patients. Survey instruments and medical record reviews are collected yearly to measure cancer screening rate changes that have occurred over the duration of the trial.

**Important NJFMRN dates:**

**Practice Managers** will be meeting on October 17<sup>th</sup> from 10AM until 3 PM at the Network office in Somerset – presenters: Steven Pap, MD from SecuReach Systems and JoEllen Ford, Practice Administrator from Lumberton Family Physicians.

The **Network Board** will be meeting October 11<sup>th</sup> in Somerset at 7PM

**Asthma / COPD** will be the focus of the next continuing education program held on Tuesday evening, November 27<sup>th</sup> at 6:30PM. Registration is required, contact the Network office.

**Convocation of Practices October 27th**

**EMR – “Get the Right Fit” – Adarsh Gupta, MD**

**Effective Coding Do's & Don'ts - TBA**

For additional information, contact Enid Cruz at 732-743-3382 ([cruze2@umdnj.edu](mailto:cruze2@umdnj.edu)) or Terry Falco 732-743-3387 ([falcote@umdnj.edu](mailto:falcote@umdnj.edu)) or visit the NJFMRN website at <http://rwjms.umdnj.edu/njfmrn/>

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**In Press**

**Cohen, DJ.** "Keywords in Qualitative Methods, Bloor, M, & Wood, F." Book Review. Evaluation and Program Planning (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).

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).

**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 (accepted with minor revision - Cancer Detection and Prevention).

**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, 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 (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).

Sussman A, Williams RL, Leverence R, Gloyd PW, **Crabtree BF.** Using Self Determination Theory to Explain Clinical Decision making in Primary Care (under review Qualitative Health Research).

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).

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**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 (under review Journal of General Internal Medicine).

**JC Crosson, S Wu, N Isaacson, B Diccico-Bloom, T Schueth, D Lancaster, EA McDonald, JL Newman, M Patel, CJ Wang, DS Bell.** A multi-method observational protocol for evaluating the effects of electronic prescribing in ambulatory care settings. (Under review. BMC Health Services Research).

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

C-W Tseng, et. al., **JC Crosson.** Race/Ethnicity and economic differences in cost-related medication underuse among insured adults with diabetes. (under review. Diabetes Care).

C Brazeau, S Rovi, R Schroeder, C Heaton, JC Washington, **JC Crosson.** Quality of care in academic and community practices of a third year family medicine clerkship. (under review Academic Medicine).

JV Selby, BE Swain, RB Gerzoff, AJ Karter, BE Waitzfelder, AF Brown, RT Ackermann, OK Duru, A Ferrara, W Herman, DG Marrero, D Caputo, KMV Narayan, for the TRIAD Study Group [**JC Crosson**]. Understanding the gap between good processes of diabetes care and poor intermediate outcomes: translating research into action for diabetes (TRIAD). (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).

**Ferrante JM, Winston DG, Chen P, de la Torre A.** Family Physicians Knowledge and Practices Regarding Chronic Hepatitis and Monitoring for Liver Cancer, (under review at Family Medicine).

**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, (under review at J Urban Health).

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

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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).

**Scott, JG, Cohen, D, DiCicco-Bloom, B, Crabtree, BF**, Stange, K, Miller, W, Understanding Healing Relationships in Primary Care (under review New England Journal of Medicine).

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

**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 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.”

**JC Crosson, B Balasubramanian, P Ohman-Strickland, M Roland, RL Phillips, A Bazemore, M Dodoo, C Fullwood, T Doran, AF Tallia, JG Scott.** A comparison of US and UK family medicine practices using UK pay-for-performance standards.

**JC Crosson, P Ohman-Strickland, B Balasubramanian, M Roland, RL Phillips, A Bazemore, M Dodoo, C Fullwood, T Doran, AF Tallia, JG Scott.** How do different P4P schemes sort ULTRA practices?

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.”

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**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**, Diez-Roux A, Shea S, Borrell L, Jackson S. "Associations of neighborhood problems and neighborhood social cohesion with mental health and health behaviors". (To be submitted to the journal Health and Place).

**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.

**Hudson SV, Ohman-Strickland P**, Lu-Yao G, Ferrante J, Cunningham R. **Orzano AJ, Crabtree BF**. "Prostate-specific antigen screening in primary care practices."

**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.

**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**

**Cohen, DJ**. Flocke, SE. Lawson, P. How teachable moments are co-constructed to deliver health behavior advice during primary care visits. To be presented at the American Academy on Communication in Health care, Charleston, SC, October 9-12, 2007.

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**Grants/Contract Related Activities**

**Active Grants**

**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 hypertensives 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). January 2004 – January 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.*

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**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.*

**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; payor, 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: 9/8/05-8/31/09, 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: 4/1/07-3/31/08, 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*

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**Hudson, SV (Pilot Project PI): DHHS, Project EXPORT, Addressing Cancer Disparities in NJ Communities, 9/30/04-9/29/07; total project costs: \$1.2 million.**

*This three year grant focuses on development of resources and infrastructure needed for cancer research, training, community education and outreach. It focuses on conducting health disparities research designed to reduce cancer rates among minorities in New Jersey and to increase the participation of African-Americans, Latinos and other health disparity groups in biomedical and behavioral research as well as prevention and intervention activities.*

**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, 04/01/07-03/31/09**

*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, 04/01/07-03/31/09**

*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.*

**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.**

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*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; September 2005 – August 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; September 2005 – August 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.**

*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)**

**Cohen, DJ, PI: Cardiovascular Disease Care and EMR Use in Community-Based Primary Care Research Practice. National Heart, Lung, and Blood Institute; 2008-2010; total project costs: \$429,001.**

*An ancillary grant to HL07800, this grant paves the way for innovative interventions to improve cardiovascular disease care by identifying strategies that support effective EMR use and high quality cardiovascular disease care in community-based primary care settings.*

**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)**

*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. Methods: We have adapted instruments developed in a series*

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*of funded studies for use in practice self-assessment. Six primary care practices will use these tools to assess existing diabetes care processes. Practices will use the organizational self-assessment findings to direct the development of a disease registry and integrate the use of the registry into existing workflow to improve processes of care that are tightly linked to intermediate outcomes. A field researcher will collect qualitative and quantitative data on the feasibility of the intervention, expenses associated with the process of registry development and use, and on the fidelity of the self-assessment process. We will assess diabetes care quality before and after the intervention through medical record review. Outcomes: Analysis of the feasibility study data will inform the development of a group randomized controlled trial of the intervention.*

**Hudson, S., PI: "Life After Cancer: Examining Survivor Transitions from Specialist to Primary Care," National Cancer Institute; 2008-2012; total project costs \$566,036**

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

*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.*