

# DATA, EDUCATION AND BEYOND: THIRTY YEARS OF SERVICE TO THE COMMUNITY HEALTH CENTERS

Trisha Petitte, MPH, MPA, RN, FNP

Assistant Director

WVU Office of Health Services Research

# History

- ▣ The Office of Health Services Research (OHSR) earliest work in converting UMWA clinics to the first CHC's in the state – early 1980's (Bill Copper)
- ▣ Staff visited communities – OHSR staff
- ▣ Recruited local boards made up of community leaders
- ▣ Trained boards – running non-profit organizations, legal aspects of CHCs
- ▣ Benedum funding provided the resources needed to start several CHC sites including New River, Cabin Creek, Rainelle, Fairmont.

# Primary Care Study Group

- ▣ OHSR created and provided support to the Primary Care Study Group which was formed to support Community Health Center Administrators. It was headed by Joyce Daniels.
- ▣ OHSR provided census data, health manpower shortage area data and physician/provider data to the Study Group

# The Need for More Community Health Centers

- ▣ OHSR created a report for the Bureau to HRSA that allowed for CHC to add additional stand-alone and satellite clinics in the state – 1990s
- ▣ The report was basically a statewide needs assessment which proposed the addition of 9 additional Community Based Health Care Center sites. Approval was granted for an additional 6 sites.

# Provider Report Cards

- ▣ One of the earliest attempts to use quality of care indicators for providers in Community Health Centers took place in the mid 1990's using Medicaid data from clinics located in the Eastern Panhandle. These report cards were developed for clinics and providers
- ▣ This project led to the development of diabetes curriculum on CD and on-line for providers (CMEs available)

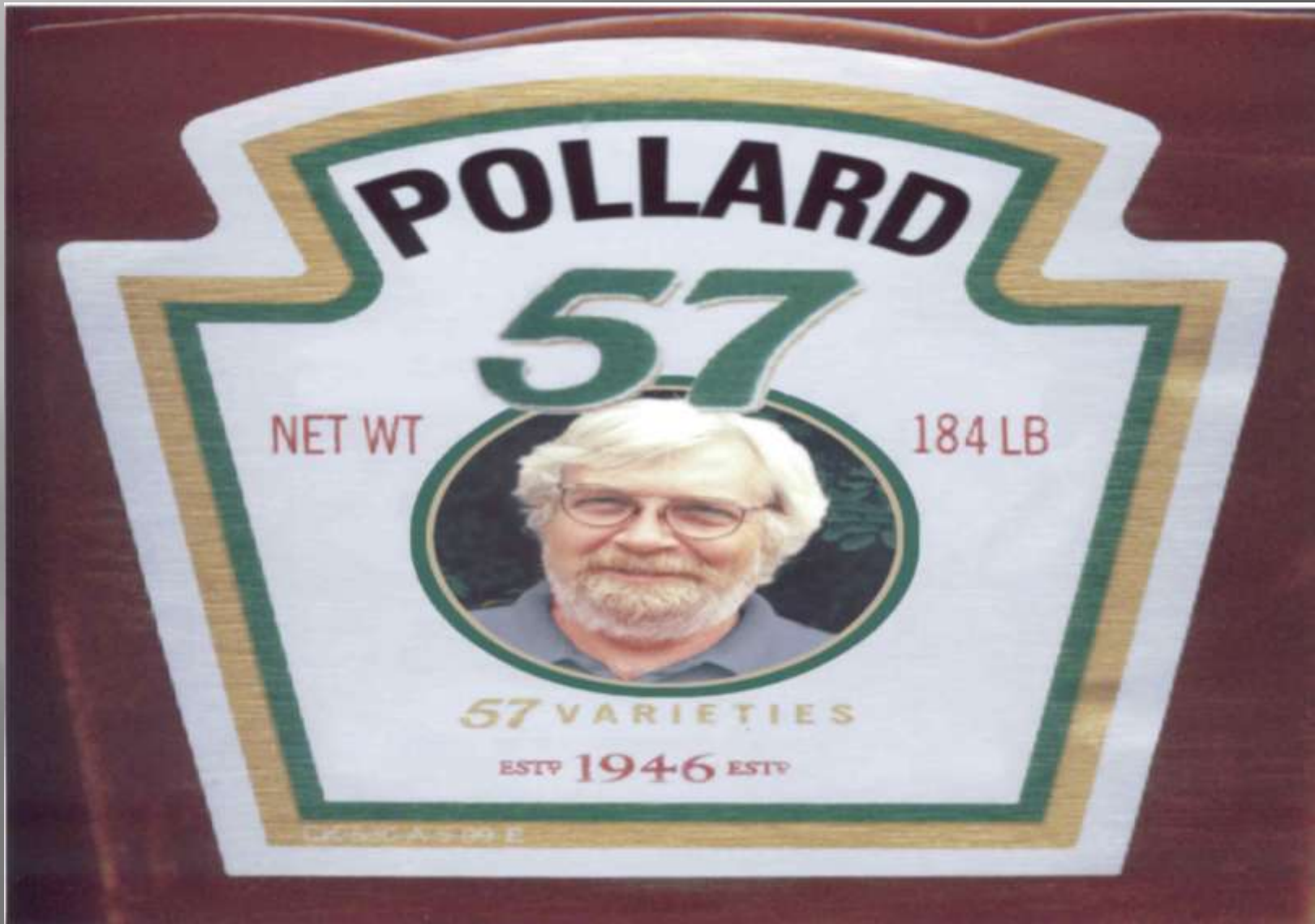
# Bureau for Public Health Funded Programs



This presentation was supported by Grant/Cooperative Agreement Numbers U32/CCU322734 and U59/CCU324180-04, and 1U50DP000675-01 from the Centers for Disease Control and Prevention.

Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

OHSR does a variety of health oriented projects all brought to you by the Bureau !!!



# Health Improvement Coordinators – HICs



- ▣ Review of data
- ▣ Education
- ▣ Creation of curriculum
- ▣ Adoption of existing curriculum – BP module
- ▣ Training and self-management  
Stanford/Conversation Mapping

# HIC Services

- ▣ Medical home – National Committee for Quality Assurance (NCQA) training – West Virginia Health Improvement Institute (WVHII) training
- ▣ Quality improvement
- ▣ MA training – college credit – Amber Crist
- ▣ Experts/Specialist – Schmidt/D’Audiffret
- ▣ New River – data beginning April 1<sup>st</sup> and compare to data 6 -12 month out

# OHSR Staff Develops New Projects with Funding from the Bureau

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## Quieter Work

But even as some high-profile projects attract media attention, quieter work in the department also is improving health across the state.

**Cecil Pollard** is working to install health management computer systems in 10 free clinics and 44 other community health centers and small hospitals statewide. Simply by saving overworked doctors time and by better organizing their information, the systems contribute to better care.

"Instead of the physician having to spend more time, it goes back to a clerk on the system who spends a little time and saves the doctor a lot of time," Pollard said.

Health of the elderly, a topic under study by **Mary Carter**, is especially relevant to West Virginia, which has the third largest population of older adults in the nation.

In one study, Carter is looking at the factors affecting how the elderly recover from an injury such as a bone fracture and why some bounce back while others begin a slow health decline. Closer focus on social network, configuration of the home and other factors may lead to better-targeted care for older adults.

Carter also is looking at how existing treatment may mask symptoms — for example, how ongoing pain medication may prevent a patient from noticing pain from a new injury.

**Rachel Abraham** is chairing the committee organizing the second annual Cross-Border Public Health Preparedness Conference on pandemic influenza.

"We never know when it's going to happen," Abraham said. "When it hap-



Photo courtesy of West Virginia University Health Sciences

**Cecil Pollard, director of the Office of Health Services Research in WVU's Department of Community Medicine, and Assistant Director Trisha Petite discuss BENEFIT, a program designed to help clinics promote physical activity among their patients.**

pens, what do we do? Do we go next door to Pennsylvania to help them? Do we wait until Charleston comes up and tells us what to do?"

At least 200 public health practi-

tioners from border counties of West Virginia, Ohio and Pennsylvania will attend the July 23 conference.

Even the newest faculty members are contributing important research.

**Tad Herzog**, new to the department last August, is challenging the dominant model for classifying smokers' motivation to quit.

A widely used model systematically underestimates smokers' motivation, Herzog's research shows. If his work leads to better classification, smokers may be given materials and encouragement more appropriate to their level of motivation, leading more to give up tobacco.

And **Anoop Shankar** looks at risk factors for cardiovascular and diabetes, among other health problems. Although Shankar has been with the department for just a few weeks, Ducatman spoke enthusiastically about his record of publishing frequently in the very best medical journals.

## Teaching

In addition to their research, community medicine faculty members are training about 80 students at the bachelor's, master's and Ph.D. levels.

Those rising public health professionals also are important to West Virginia.

A survey of public health officials in the state conducted by **Ian Rockett** found that a wave of retirements is on the way.

Rockett is helping to make the department's teaching more accessible through a new online Masters in Public Health program — offered mainly regionally because there are practicum requirements.

He estimated that 10 students took advantage of that program in its first year.

"We have to deal with attrition," Rockett said. "Are we ready to bring in more qualified people?"

# Congratulations

# OHSR Serves on Advisory Boards and Statewide Health Organizations



# OHSR Dresses Up for Receptions and Celebrates Success in Improvements in the Health Care Delivery System



# OHSR Travel Over the Past 30 Years



1980's



1990's



2000's

# CDEMS Registry



Peg Adams

- ▣ Told Cecil to go to Baltimore for the Health Disparities Collaborative training on CVDEMS



Cecil Pollard

# Registries and EHRs



- ▣ Registry – CDEMS
- ▣ Useful tool in understanding patient outcomes and population based data
- ▣ National CDEMS group - Medical Home and Meaningful Use

# Feedback from CDEMS National Support Group

“I can't believe how timely Francisco's presentation was! I just had been talking with one of our volunteer physicians about her residency at Group Health which had lead me to google it. I am working hard to "see" a clinical model that would really fit my clinic (and most underserved by extension).

Yesterday, strengthened by the sense of community that your group gives me, I burst into my administrator's office and asked her to please consider budgeting for me to audit the charts and bring the clinical database up to speed for accurately expressing our level of acuity. She then actually listened while I explained the Risk Matrix and how it represents the status of group health as well as individual. I do not relish reviewing 2400 charts, but would do it to have the database operational. This could be exciting, I will keep you posted...”

# Research

- ▣ Research Articles
- ▣ Cecil Pollard, MA; Kelly A. Bailey, MA; Trisha Petite, RN, MPA; Adam Baus, MA, MPH; Mary Swim, MA; and Michael Hendryx, PhD (2009). Electronic Patient Registries Improve Diabetes Care and Clinical Outcomes in Rural Community Health Centers. *The Journal of Rural Health*, Winter 2009 [Online]. Available at: <http://www3.interscience.wiley.com/cgi-bin/fulltext/121585395/PDFSTART>
- ▣ Putman, H., Baus, A. & Romano, M. (2007). Use of the Chronic Disease Electronic Management System to Improve the Care of Patients with Asthma in West Virginia. *Online Journal of Nursing Informatics (OJNI)*, 11, (2) [Online]. Available at: [http://ojni.org/11\\_2/putman.htm](http://ojni.org/11_2/putman.htm)
- ▣ Request for article from: *Journal of Diabetes Science and Technology*. Slated for publication in the March 2011 issue.

# WV Projects have expanded beyond our state's borders

Work has let to our becoming “experts” using technology to improve quality of care.

- ▣ Oklahoma
- ▣ JHU
- ▣ Black Lung
- ▣ Colorado – free clinic in CO
- ▣ Pacific Island, Caribbean, Latin American
- ▣ International Diabetes Foundation – program they are trying to do in the Caribbean – 16 or 21 nations to improve Diabetes Care

# We Thank the Bureau for our Burro . . .



Without them we would have  
gone nowhere



# OHSR Staff

- ▣ Cecil Pollard, Director
  - ▣ (304) 293-1080 [cpollard@hsc.wvu.edu](mailto:cpollard@hsc.wvu.edu)
- ▣ Trisha Petite, Assistant Director,
  - ▣ Health Improvement Consultant
    - ▣ (304) 293-1084 [tpetite@hsc.wvu.edu](mailto:tpetite@hsc.wvu.edu)
- ▣ Mary Swim, Applications Programmer, CIS Support
  - ▣ (304) 293-1079 [mswim@hsc.wvu.edu](mailto:mswim@hsc.wvu.edu)
- ▣ Adam Baus, Sr. Program Coordinator, CIS Support
  - ▣ (304) 293-1083 [abaus@hsc.wvu.edu](mailto:abaus@hsc.wvu.edu)
- ▣ Nell Stuart, Health Improvement Consultant
  - ▣ (304) 276-3785 [nstuart@hsc.wvu.edu](mailto:nstuart@hsc.wvu.edu)
- ▣ Marie Gravely, Health Improvement Consultant
  - ▣ (304) 482-6016 [mgravely@hsc.wvu.edu](mailto:mgravely@hsc.wvu.edu)