

Project Title:	Enhancing Complex Care through an Integrated Care Coordination Information System
Principal Investigator:	Dorr, David, M.D., M.S.
Organization:	Oregon Health and Science University
Mechanism:	RFA: HS08-002: Ambulatory Safety and Quality Program: Improving Management of Individuals with Complex Healthcare Needs through Health IT (MCP)
Grant Number:	R18 HS 017832
Project Period:	09/08 – 09/11
AHRQ Funding Amount:	\$1,155,147
Summary Status as of:	December 2008

Strategic Goal: Develop and disseminate health IT evidence and evidence-based tools to improve health care decisionmaking through the use of integrated data and knowledge management.

Business Goal: Implementation and Use

Summary: Dr. Dorr and his team launched their project in late September 2008. This project proposes to investigate whether care for patients with complex needs can be improved by implementing an integrated care coordination information system (ICCIS) that incorporates population management techniques, patient-centered goals, quality measures, and clinical reminders. In the first year, Dr. Dorr's team will help the enrolled clinics build the care management functions into their existing information systems. Enrolled clinics include two inner city locations and four rural locations. All enrolled clinics are required to have a Certification Commission for Healthcare Information Technology (CCHIT) certified electronic health record (EHR) with Continuity of Care Record (Document) (CCR-D) export standardization or, for paper-based clinics, use of the Web-enabled tool that provides ICCIS functions. ICCIS is a self-developed system. In the second and third years, Dr. Dorr and his team will evaluate how well care coordination functions are used at the clinics. Measures will include indicators of patient activation, clinic-level quality of care, clinic-level process measures, and patient health outcomes.

Specific Aims

- Implement the Care Management Plus and Integrated Care Coordination Implementation System models. **(Ongoing)**
- Assess the implementation. **(Upcoming)**
- Perform a cluster randomized trial in the six clinics on the ability to use the IT functions to monitor and deliver care to high risk patients through a care coordination (arm 1) or a quality performance model (arm 2). **(Upcoming)**
- Understand and disseminate the outcome benefits, challenges, and unintended consequences from use of these functions for patients and the system. **(Upcoming)**

2008 Activities: The main activity for Dr. Dorr and his team this quarter has been to build the system. They are about halfway done and have developed a shell with security requirements and authentication to test. In addition, they have interviewed all six clinics to establish a baseline of workflow processes and conducted baseline usability testing on the four rural Oregon clinics to better understand the content and context for the clinics. From the interviews, they developed a set of the top five requests for functionality to incorporate into the system. They have also identified the need to develop a process for prioritizing and responding to other requests for support by the clinics—this process development will have implications for future scalability and dissemination of the system.

Preliminary Impact and Findings: There are no findings at this time because they are still developing the intervention.

Selected Outputs

ICCIS Information System: prototype available for review, populated with test patients.

Grantee's Most Recent Self-Reported Quarterly Status: The project is generally on track, meeting 80-99 percent of milestones.

Milestones: Progress is completely on track.

Budget: Spending is roughly on target.