

HEALTH SERVICES CORE



Harvey Cohen, MD Core Chair



Melisa Wong, MD Junior Faculty Lead

HEALTH SERVICES CORE MEMBERS

- Harvey Cohen, MD
 Core Chair
- Melisa Wong, MD, MAS Junior Investigator Lead
- Supriya Mohile, MD, MS Pl Liaison
- Stuart Lichtman, MD,FACPOrganizational Liaisons Chair
- Tomma Hargraves Patient Advocate Board: SCOREboard Member
- Meghan Karuturi, MD Junior Investigator Board Member

- Lisa Lowenstein, PhD
- Jennifer Lund, PhD
- Cara McDermott,PharmD, PhD
- Manvi Sharma, RPh, PhD
 Junior Investigator Board
 Member
- John Simmons, MD
 Patient Advocate Board:
 SCOREboard Member



HEALTH SERVICES CORE

CORE MISSION

- Foster and advance Health Services Research (HSR) in geriatric oncology
- Support researchers to design and conduct high-quality HSR focused on older adults with cancer and caregivers
 including patterns of care, comparative effectiveness, care delivery, and implementation science
- Partner with Biostatistics, Epidemiology, and Research Design (Analytics) Core to understand strengths and limitations of specific data elements
- Provide consultations for HSR projects
 - Aims and study design
 - Grant planning
 - Data collection tools for health care utilization
 - Data access procedures for administrative databases
- Expand evidence base for personalized tailored care for older adults with cancer

CORE FUNCTION

- Consultation service for junior geriatric oncology investigators and senior investigators new to cancer and aging
- Advance quality of real-world data for older adults by advocating inclusion of standardized geriatric-specific doma





ACCOMPLISHMENTS

- R21 phase/R33 Year 1 accomplishments/deliverables
 - 6 Core meetings to review 4 inquiries
 - PCORI implementation grant to implement GA in clinical practice (Lowenstein)
 - Career development grant to improve GA delivery and documentation in diverse populations (Schiaffino)
 - Form development for healthcare utilization for survivorship R01 (Mohile, 2 calls)
 - Collaborated with Analytics Core to develop database of available gerionc datasets

WHAT'S WORKING/WHAT'S NOT?

- What's working
 - Diverse Core membership with diverse expertise
 - Engaged Core members ready to provide input
 - High Core meeting attendance by members
- Areas for Improvement
 - Need to increase number of HSR inquiries from broader CARG membership (only one inquiry from non-Core members)
 - Clarify potential areas of overlap with Analytics Core
 - Ongoing identification of expertise gaps we need to fill



HEALTH SERVICES CORE: EXAMPLE INQUIRY QUESTIONS

Administrative claims database research:

- How do I access datasets and create novel database linkages?
- How do I identify relevant study populations, define treatments, covariates, and outcomes?

Implementation science:

- Which implementation science theory/framework/model should I use for my research question?
- What implementation outcomes should be measured and how?
- How should I design my study to capture relevant outcomes to inform a follow-up study to foster dissemination and implementation?
- How do I adapt an evidence-based intervention for local settings and evaluate the adapted intervention?

Descriptive and causal inference studies:

How do I address confounding, immortal time bias, and enhance external validity?



HEALTH SERVICES CORE: EXAMPLE INQUIRY QUESTIONS

Mixed methods:

- How can I incorporate mixed methods to enhance my study?
- How do I best integrate my quantitative and qualitative data in a rigorous fashion?

Cancer care delivery research:

- How do I design an intervention that is feasible from a patient perspective and sustainable long-term?
- How to design data collection tools that are low burden for patient and project staff to capture important health care utilization measures?

Shared decision making:

How do I adapt this decision aid for older adults? How do I best measure shared decision making to test my decision aid?

Palliative care and end-of-life HSR:

How do I address distinct challenges in data collection, follow-up response, and work with caregiver vulnerable populations





HEALTH SERVICES CORE: FUTURE DIRECTIONS

- Core membership: Goal of inclusion
 - Expand to new members based on expertise (let us know if you're interested!)
 - Annual recommitment based on individual availability
- Outreach
 - Each Core member to bring at least one inquiry to CARG this year (e.g., self, mentees, colleagues)
- Collaboration with other Cores
 - Potential collaborative input from multiple Cores with select members based on expertise
- Career development
 - Option to open some HSR Core calls to CARG members if the specific inquiry allows

