The UCD Center for Health Services Research in Primary Care has now completed an initial planning year followed by two years of development, carefully building new expertise, experience and relationships within the University and with outside partners during this time. During the past year, the Center has gone through a number of transitions and has experienced growth in the areas of administration, promotion of interdisciplinary research, and the enhancement of the intellectual environment for health services research at UC Davis. This annual report provides an overview of the activities and accomplishments of this year.

I. Activities and Accomplishment of Current Year
   
A. Administrative and Organizational Development

New Center Director

The year began with the appointment of a new Center Director, Richard Kravitz, M.D., M.S.P.H., Associate Professor in the Department of Internal Medicine (September, 1996). He follows Klea D. Bertakis, M.D., M.P.H., who had expressed her desire to step down as the Founding Director following two years of skillful leadership. During her tenure, Dr. Bertakis, with the assistance of the Executive Committee, positioned the Center to play an important role within the University and in the health services research community generally. Dr. Kravitz, an experienced health services researcher and an active member of the Executive Committee, accepted the Dean’s invitation to take this position.

New Administrative Base

Although the Center for Health Services Research in Primary Care is currently designated as an Organized Research Project (ORP) and as such is a multidisciplinary unit that has working relationships outside traditional department boundaries, for administrative purposes, it is still based within a single department. With the appointment of Dr. Kravitz as Center Director, the administrative base of the Center moved from the Department of Family and Community Medicine to the Department of Internal Medicine. This transition was effective November 1, 1996.

New Center Space

Last summer the Center moved into new office space in Suite 2500 of the Patient Support Services Building (PSSB) on the UCDMC campus. This space is conveniently located to the majority of our primary care faculty members. The space consists of three faculty offices, work areas for 4-5 research assistants, administrative support space and a small area for a library with work space. At this time, one office is available for faculty members’ use on a drop in basis.
The Center held a late afternoon/evening Open House in October to invite faculty and other interested individuals to visit the new office space and learn more about the Center.

New Computer System

The Department of Internal Medicine provided over $30,000 in funds to purchase an advanced computing system which will meet the complex and varied needs of the Center and its faculty research projects for some time. This system includes a Hewlett Packard LH Plus server running Microsoft Windows NT 4.0 Server system software. With a 4 gigabyte disk array (hardware RAID), the server will be able to handle large data sets with ease and security. Two HP Pentium Pro 200 Mhz workstations, three advanced workstations and a HP5 laser printer were also added to the system. Researchers who need to access the server from offsite may use modem access to the wide area network. When added to the computers previously donated by the Department of Family and Community Medicine, the Center has acquired impressive computing capabilities. In addition, the Departments of Medicine and Psychiatry have allocated time of their computer support staff to help the Center make this complex system operational.

Center Core faculty and staff

During 1996-1997, the Center recruited a new Research Coordinator to replace Jill Miller, who left in July. A stellar replacement was found in Carol Franz, Ph.D. (PGR IX), who started in January and has assumed the responsibilities associated with research proposal development and coordination of ongoing research projects. Ms. Jane Fox-Garcia continued to serve as the part-time administrative director for the Center. On loan from the Department of Family and Community Medicine, she will be returning to the Department full-time in July, 1997 and a replacement will be recruited. Ms. Christine Harlan continues to served as the Administrative Assistant for the Center. In recognition of her expanded job responsibilities, Ms. Harlan’s position was reclassified to an Administrative Assistant II during the past year. A number of undergraduate students, student volunteers and graduate student interns have also worked with the Center over the past year to assist with the research projects underway. At the end of the year as these research activities continue to expand, an additional 50% variable-time research associate (PGR) is being recruited.

Dr. Rahman Azari continued as a part-time faculty member with the Center, holding the role of Assistant Director for Quantitative Methods. A faculty member in the Division of Statistics, Dr. Azari also provides assistance to the Center by assisting faculty in the development of new research proposals. He maintains regular office hours at the Center to provide limited consultation to faculty members. Depending on funding availability, Dr. Azari is also available to provide assistance on ongoing research projects.

Executive Committee

The Executive Committee continues to provide guidance to the Director on the long-term development of the Center as well as providing operational guidance, determining the allocation of Center resources, reviewing and approving faculty membership applications, etc. The Center’s bylaws were amended this past year to expand the Committee’s membership to include
two additional members, including one position for the Founding Director. Current Executive Committee membership includes:

**Faculty**

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
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<tbody>
<tr>
<td>Richard L. Kravitz, M.D, M.S.P.H.</td>
<td>Center Director, Division of General Medicine</td>
</tr>
<tr>
<td>Klea D. Bertakis, M.D., M.P.H.</td>
<td>Founding Director, Family and Community Medicine</td>
</tr>
<tr>
<td>Rahman Azari, Ph.D.</td>
<td>Division of Statistics, Assistant Director for Quantitative Methods</td>
</tr>
<tr>
<td>Edward Callahan, Ph.D.</td>
<td>Family and Community Medicine</td>
</tr>
<tr>
<td>L. Jay Helms, Ph.D.</td>
<td>Economics</td>
</tr>
<tr>
<td>Craig McDonald, M.D., M.P.H.</td>
<td>Physical Medicine and Rehabilitation</td>
</tr>
<tr>
<td>Joy Melnikow, M.D., M.P.H.</td>
<td>Family and Community Medicine</td>
</tr>
<tr>
<td>Thomas S. Nesbitt, M.D., M.P.H.</td>
<td>Family and Community Medicine, Rural Health and Telemedicine Program</td>
</tr>
<tr>
<td>John Robbins, M.D., M.S.P.H.</td>
<td>General Medicine</td>
</tr>
<tr>
<td>Patrick Romano, M.D., M.P.H.</td>
<td>General Medicine</td>
</tr>
<tr>
<td>Marc Schenker, M.D., M.P.H.</td>
<td>Epidemiology and Preventive Medicine</td>
</tr>
</tbody>
</table>

**Faculty Membership in the Center**

Faculty membership increased during the past year to 50 regular or affiliate members. Of this number, 33 hold their primary faculty appointment in a Department in the School of Medicine and 17 (34%) hold a faculty appointment with other Departments in the University or with organizations outside of the University. A list of faculty members is appended in Attachment #1.

**Increasing the visibility of the Center**

Although the Center is now well-known to the health services researchers on campus, there are potentially many more faculty who have related or overlapping research interests and skills that we have yet to identify. Thus, the Center has tried to identify ways to increase its visibility across campus and the community. During the past year, the Center printed a quarterly newsletter highlighting its activities. This newsletter is currently distributed to approximately 150 individuals. In addition, the Center Director has made presentations to various groups during the past year, including the UC Davis Board of Visitors, the Primary Care Network Physicians, the UCDMC Information Services Department, The Ambulatory Sentinel Research Network, and Intermountain Health, Inc. The Center also participated in the “Future Faire” which was designed to showcase the School’s Centers of Excellence to members of the community.
B. Research Proposal Development

Providing assistance in the development and submission of new research proposals is a major objective of the Center. In particular, the Center seeks to assist junior faculty members develop their own area of research, including the development of proposals to initiate pilot projects as well as full research programs. During the past year, the Center concentrated on working with faculty who were interested in submitting proposals for the Hibbard E. Williams Research Funds. The Center assisted three faculty members submit proposals of which two were funded. In addition, two other faculty members submitted proposals which included support for the Center’s statistician and they were also funded.

Over the course of the year, a total of 13 proposals and 4 Letters of Intent were submitted to a variety of funding sources, including private foundations (Pew Charitable Trusts, Henry J. Kaiser Family Foundation), state and federal agencies (California Office of Statewide Health Planning and Development, Agency for Health Care Policy and Research) and internal support (Hibbard E. Williams Research Fund, UCD Health System, and New Initiatives Reserve Fund). Attachment #2 summarizes these proposals, including the funds requested and the funding status.

The Center also assisted the Portland VA with a proposal to develop a Northwest Health Services Research and Development Center which, if funded, would have major ties with UC Davis. In addition, it contributed to UC Davis’ application to become a national Center of Excellence in Women’s Health.

C. Active Research Projects during 1996-1997

During the 1996-97 fiscal year, five funded projects were administered through the Center:

UCDHS Primary Care Network Quality Management

Funded by the UCDHS, the PCN Quality Management project, conducted by Richard Kravitz, MD, Patrick Romano, MD, and Catherine Donovan, RN, involved the development and administration of a patient health status and satisfaction survey to over 3500 patients from 71 physicians at 20 UCD PCN sites. Project goals included assessment of patient perceptions of quality of care in the PCN and the extent to which patients were receiving preventive care. Overall satisfaction with care was “very good” to “excellent”; significant regional variations in satisfaction with and quality of care were found.

Center faculty, led by Patrick Romano, MD, were also funded to develop and implement an outcomes measurement data base for use by faculty and staff at UCDMC to measure clinical outcomes of practice changes (the QUEST Teams Outcomes Project) that may evolve in clinical Quest teams. Goals of the project involved the establishment of a library on assessment instruments specific to clinical areas, a review of the current literature on measuring outcomes, and meetings with clinical teams to introduce and discuss methods and measures of clinical outcomes.

Correctional Telemedicine Evaluation
An evaluation of the Correctional Telemedicine project was initiated in the spring of 1997, led by Richard Kravitz, MD. This project is funded by the UCDHS, Rural Health and Telemedicine Project. The purpose of the project is to assess the perceived usefulness of the UCD telemedicine services to jail clinicians, and the costs of the services to the jail and to UCD. Intervention specialties are ENT, Orthopedics, and Dermatology; control specialties are ophthalmology, urology, neurology, and gastroenterology. Following an initial period in which evaluation instruments and an interview were derived, data collection has just started, based on actual telemedicine encounters between inmates, jail physicians, and UCD specialists.

Adolescent Mental Health in Primary Care

Emily Harris, MD (Psychiatry) received funding to examine adolescent mental health in primary care settings. Center staff have coordinated the data collection from approximately 71 adolescents and their parents at two UCD sites (Pediatrics, and the Family Practice Clinic), supervised five UCD interns, and organized data management and analyses. Among the goals of the project were 1) to establish rates of psychological disorders among adolescents needing medical care; and 2) to validate new measures appropriate for adolescents (in the past questionnaires have been oriented towards children or adults, not adolescents).

Cesarean Section Rate in California

A core group of Center faculty (Richard Kravitz, MD and Patrick Romano, MD [General Medicine], Joy Melnikow, MD [Family and Community Medicine], William Gilbert, MD and Nina Boe, MD [Obstetrics and Gynecology] and Carol Franz, PhD [CHSR/PC]) collaborated with the Office of Statewide Health Planning and Development (OSHPD) in a two part project on the Cesarean Section rate in California. Phase 1--a major literature review of variations in utilization of c-sections, outcomes, and interventions, accompanied by a series of research proposals--was completed in April 1997, culminating in a report to an OSHPD committee of experts on cesarean section in May 1997. On the basis of that report, two research projects were identified --a study of the processes of care in high and low cesarean section hospitals, and a study of the role of opinion leaders--that comprise Phase 2 of the contract. Preliminary work on these projects began in June 1997 and will be completed by June 1999.

Impact of Patient Utilization of Interpretation Services

A study of costs and quality of care for patients requiring interpreters was funded by the Hibbard E. Williams Research Fund. Dr. Kravitz investigated differences in the processes of care among English-, Russian-, and Spanish-speaking patients at UCDMC, estimated the costs of care for monolingual non-English speaking patients as compared with patients proficient in English (bilingual) and assessed differences in compliance with treatment between patients proficient or not-proficient in English. Results have implications for the organization and financing of care provided to patients with limited English proficiency. Data collection and management is complete; data analyses are underway.

D. Faculty Seminar Series
One of the fundamental aims of the Center is to enhance the intellectual environment for health services research at UC Davis. To this end, the Center continued its successful noontime seminar series, run under the leadership of Patrick Romano, M.D., M.P.H. Held every second and fourth Thursday of the month, seminars are open to all Center members and other interested individuals. During the past year, 26 seminars were held, covering a broad range of topics. A list of these seminars can be found in Attachment #3.

E. Faculty Recruitment

The Center reopened its search for two new FTE faculty members this past November. With permission from Dean Lazarus, the Center expanded the search to include Ph.D. health services researchers. Advertisements were placed in six national journals and newsletters and letters were sent to chairs of primary care departments and health services research centers across the country. A varied pool of 57 candidates was screened with top candidates invited for interviews. Offers have been made to two very promising candidates (one a PhD in health policy and the other a psychiatrist and mental health services researcher) and negotiations are currently underway. Once these positions have been filled, the Center will be in an even better position to help faculty members with proposal development and methodologic support.

II. Long-Term Strategic Planning

In last year’s Annual Report, we identified a number of issues which we believe are critical to the Center’s long-term success and viability. Two of these key areas are developing our sources of competitive advantage and developing long-term administrative support for the Center. This past Spring, the Center commissioned students in the UC Davis’ Graduate School of Management’s Work Professionals MBA Program to develop a strategic plan for the Center. These students interviewed key faculty, health systems administrators and others to develop this plan. The students’ plan, titled, “Enhancing Quality and Improving Efficiency in Primary Care through Research and Evaluation,” was presented to the Executive Committee in June. The Executive Committee is studying the findings and will announce a plan to expand the Center’s efforts in these areas.

Last year, the Center identified three areas of potential strength and has worked on building its expertise and work in these areas. These include:

- **Rural Health**: The Center has collaborated with the Rural Health/Telemedicine Program for one funded research project (Jail Telemedicine Evaluation) and consulted with the Program in its development of the evaluation component of a federal Rural Telemedicine Grant it submitted to the federal Office of Rural Health Policy.
• **Proximity to State Government:** During the past year, the Center contracted with the Office of Statewide Health Policy and Development for a project examining the rate of Cesarean Sections in California. This is the first contract between the State and the Center and this initial work has lead to an amendment to the contract for additional work.

• **Access to large Network of Community-based Primary Care Physicians:** With the growing recognition of the importance and need for research in primary care that is based in the “real-life” setting of community physicians’ offices, the existence of the UCD Primary Care Network offers real potential to establish such a research laboratory. To help work with these community physicians to develop such a research network, the Center submitted a proposal to the New Initiative Reserve Fund. The status of that proposal is pending.

Finally, in last year’s report, we discussed the need for the Center to have administrative control over the faculty research grants which supports the research being conducted in the Center. If the Center is to support multidisciplinary research, it must have the ability to allocate funds to its own staff in a timely and responsive fashion and to participating investigators in multiple departments. One of the options open to the Center is to seek designation as an Organized Research Unit (ORU). (As a preliminary step, the Center received designation as an Organized Research Project two years ago.) Currently, the Center is depending on the cooperation and goodwill of the multiple departments with which it deals. This is a complex administrative structure and the efficacy of this system will be carefully evaluated in the coming year as the Center undertakes more funded research projects.