







## How is Our Work Different?

- We fund research on which care options work, for whom, under which circumstances.
- We focus on answering questions most important to patients and those who care for them.
- We aim to produce evidence that can be easily applied in real-world settings.
- We engage patients, caregivers, clinicians, insurers, employers and other stakeholders throughout the research process.
- This makes it more likely we'll get the research questions right and that the study results will be useful and taken up in practice.







## We Fund CER

Research that ....

- Generates and synthesizes evidence comparing benefits and harms of at least two different methods to prevent, diagnose, treat, and monitor a clinical condition or improve care delivery
- Measures benefits in real-world populations
- Informs a specific clinical or policy decision
- Describes results in subgroups of people
- Applies appropriate methods and data sources
- Helps consumers, clinicians, purchasers, and policy makers make informed decisions that will improve care for individuals and populations

Adapted from Initial National Priorities for Comparative Effectiveness Research, Institute of Medicine of the National Academies

PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

















## We Fund Research That...

#### Targets specific, high-priority topics, including:

- PCOR treatment options in uterine fibroids\*
- Multifactorial fall injury prevention strategy in older persons\*\*
- Effectiveness of transitional care
- Treatment options for African Americans and Hispanics/Latinos with uncontrolled asthma
- Obesity treatment options set in primary care for underserved populations
- Clinical interventions to address hypertension disparities\*\*

\*Project administered by AHRQ \*\*Project administered by NIH









### A Comparison of Nonsurgical Treatment Methods for Patients with Lumbar Spinal Stenosis

#### Engagement

 Questionnaires before and after treatment will collect patient-reported outcomes

#### **Potential Impact**

 Could change practice by determining whether there are any examination findings that could be used to predict which type of patient would do better with which type of treatment for lumbar spinal stenosis

#### Methods

• Randomized controlled trial

Compares the effectiveness of three common nonsurgical treatment approaches for stenosis: 1) usual medical care that involves prescription drugs and/or injections into the spine; 2) group exercise in supervised community center; and 3) hands-on (manual) therapy and rehabilitative

exercises in a clinical setting.

Principal Investigator: Michael J. Schneider, DC, PhD, University of Pittsburgh Pittsburgh, PA

Assessment of Prevention, Diagnosis, and Treatment Options, awarded December 2012







## Early Supported Discharge for Improving Functional Outcomes after Stroke

#### Engagement

 Patients, caregivers, and other stakeholders guided project planning and will be engaged continually at both state and community levels

#### **Potential Impact**

 Could fill an evidence gap for an effective postacute care model that specifically addresses the needs of stroke patients and their caregivers across the country

#### Methods

 Pragmatic cluster RCT in 50 North Carolina (NC) hospitals Building on the successful NC Stroke Care Collaborative (NCSCC) registry, a prospective stroke database in which 51 (of 113) hospitals in NC enroll patients, this pragmatic cluster RCT of 50 NC hospitals aims to determine the effectiveness of comprehensive postacute stroke services (COMPASS), a patient-centered intervention uniting transitional care management services and elements of early supported discharge in stroke patients discharged directly home.

> Principal Investigator: Pamela Duncan, PhD, PT Wake Forest University Winston-Salem, NC

Large Pragmatic Studies to Improve Patient-Centered Outcomes, awarded February 2015



# The National Patient-Centered Clinical Research Network (PCORnet)

- Improve the nation's capacity to conduct clinical research faster, more efficiently and less expensively, with greater power
- Establish a large, highly representative, national patient-centered clinical research network with a focus on conducting randomized and observational comparative studies
- Support a learning US healthcare system, which would allow for largescale research to be conducted with greater accuracy and efficiency within real-world care-delivery systems















