

Making Health Services Research Relevant to the C-Suite

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November 9, 2018

Overview

- **Disclosures**
- **Statement of the problem**
- **What we are doing**
- **Summary**
- **Q&A**

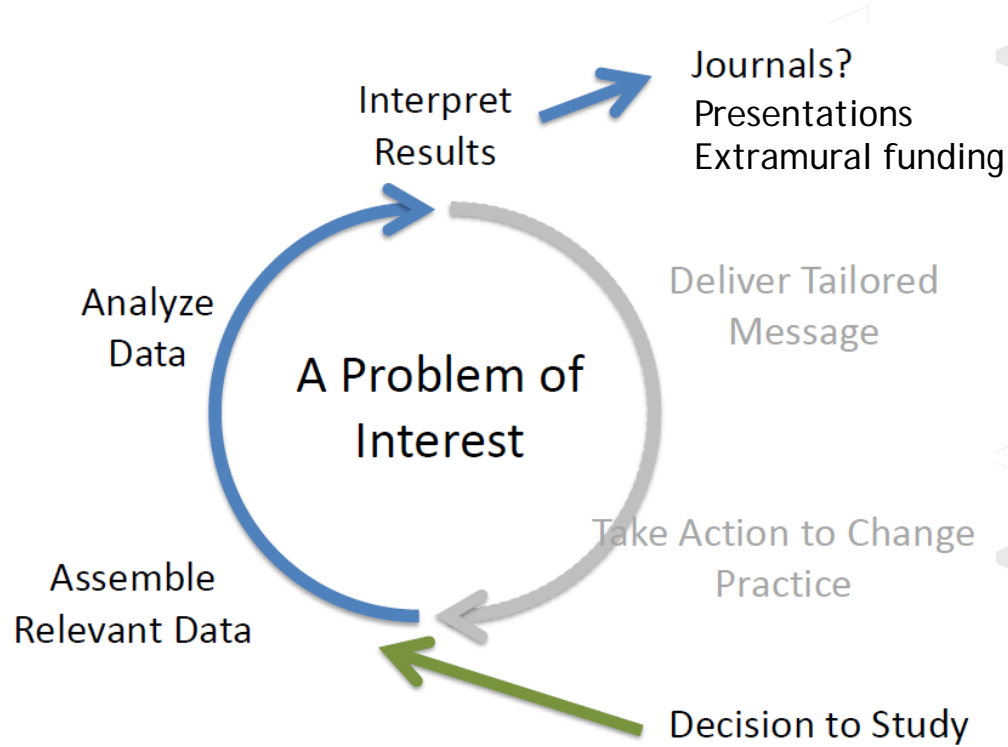


Disclosures

- **“Borrowed” title**
- **Historical emphasis on “top down” approaches in health services research**
- **Our practice-based research is often not positioned to produce impact and be of relevance to the C-Suite**

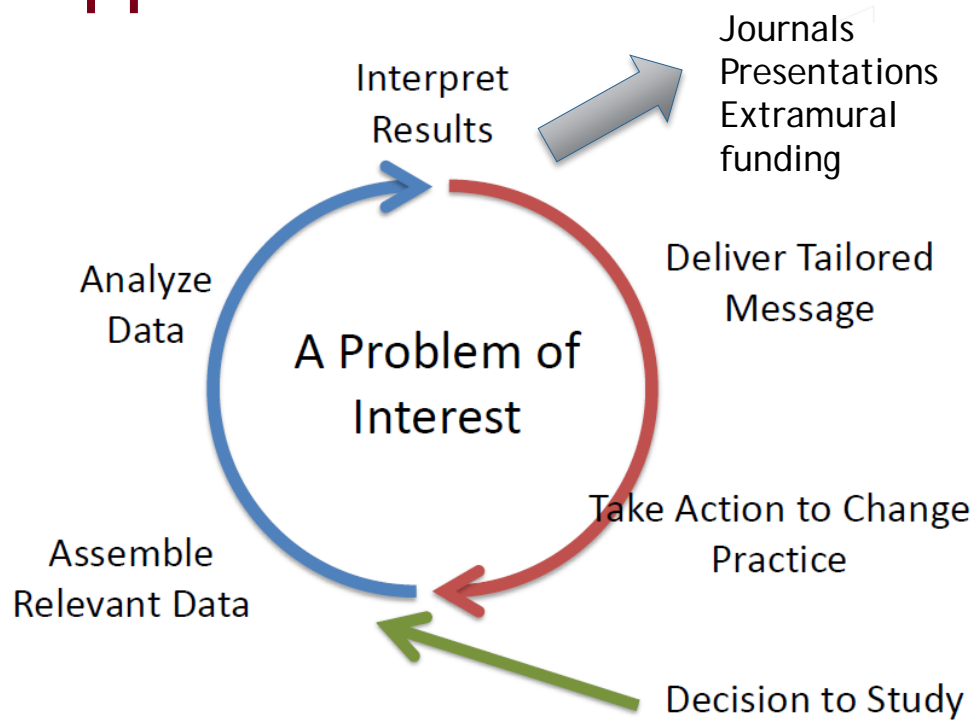


Typical Approach



Source: Friedman CP, University of Michigan Department of Learning Health Sciences

Alternative Approach



Source: Friedman CP, University of Michigan Department of Learning Health Sciences

Problem

- **Lag between biomedical discoveries and their implementation to influence clinical care**
- **Fast changing clinical context**
- **Healthcare leaders see the speed and focus of research as “out of sync” with these changes**
- **Rapid, iterative learning is needed**
- **“Evidence informs practice, and practice informs evidence”
Green et al., 2012**
- **Traditional health services research training programs**
- **Processes and structures where researchers and delivery systems can connect need to be developed**

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Learning Health Systems Research

Learning Health System:

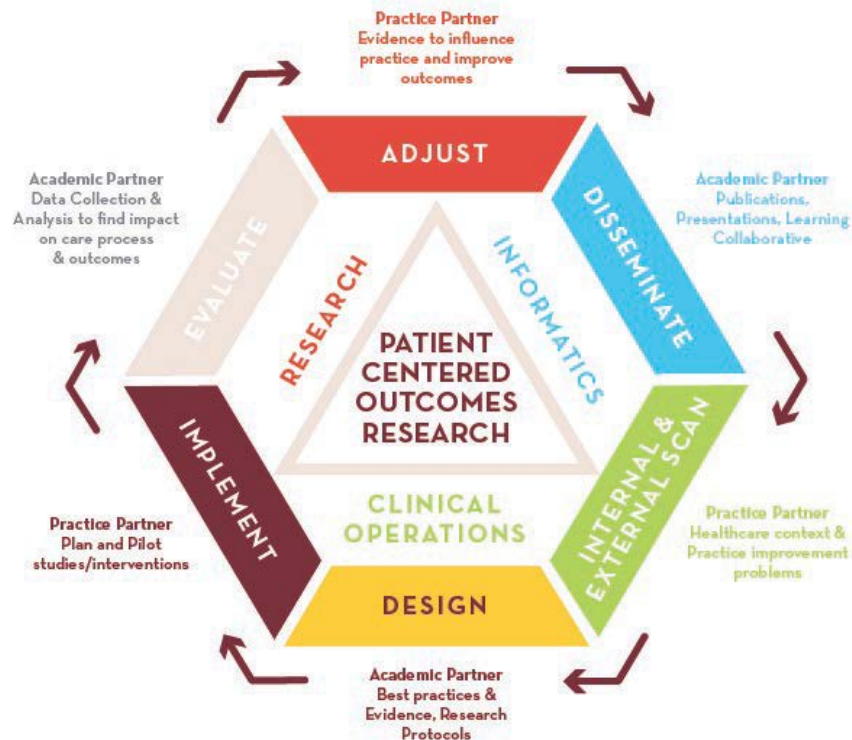
“A continuous learning health system is one where knowledge is derived from practice and used to drive the cycle of continuous improvement.” IOM, 2015

Learning Health Systems Researcher:

“An individual who is embedded within a health system and collaborates with its stakeholders to produce novel insights and evidence that can be rapidly implemented to improve the outcomes of individuals and populations and health systems performance.” AHRQ, 2017

Learning Health Systems Research

FIGURE 1: Academic - Practice Partnership to Promote Training in Learning Health Systems



LHS Research Competencies

- **Systems science**
- **Research questions and standards of scientific evidence**
- **Research methods**
- **Informatics**
- **Ethics of research and implementation in health systems**
- **Improvement and implementation science**
- **Engagement, leadership, and research management**

Source: Forrest CB, Chesley FD, Tregear ML, Mistry KB. Development of the Learning Health System Researcher Core Competencies. Health Serv Res. 2017 Aug 4 [Epub ahead of print]

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- **Theory informed, practice enabled - MHA program**

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- **Improvement and implementation science**
- **Engagement, leadership, and research management**
- **Theory informed, practice enabled, methods enacted**
- **LHS research**

What We Are Doing To Make Research More Relevant To The C-Suite

- **The Minnesota Learning Health System Mentored Career Development Program (MN-LHS)**
- **Learning Health Care Systems Initiative**

Learning Health Systems Mentored Career Development Program

FOA post date: September 5, 2017

Purpose:

To train clinical and research scientists to have the skills to support and lead efforts to apply patient-centered outcomes research (PCOR) methods and conduct PCOR research in a LHS and facilitate rapid implementation of evidence that will improve quality of care and patient outcomes.

Funder: AHRQ and PCORI – K12 mechanism

Program: The Minnesota Learning Health System Mentored Career Development Program (MN-LHS)

MN-LHS Goals

- **The MN-LHS program will train a new generation of LHS researchers embedded at the interface of research, informatics, and clinical operations within learning health systems**
- **Promote recruitment, advancement, retention, and scholarship of researchers and mentors in LHS-related research careers**
- **Serve as a model for other institutions and be a strong partner in the AHRQ and PCORI Learning Collaborative**

Figure 3: The Minnesota Learning Healthcare System Mentored Career Development Program



Learning Health Care Systems Initiative

- **Set up a program, core, or center in the spirit of the University's land grant mission**
- **Consultation, workshops, formal educational offerings**
- **“Ideas Contest”**
- **Make the services and expertise in the program available to health systems, payers, and policymakers across the state**
- **Consider the entire state as one learning health system (Minnesota collaborative)**

Summary

- Healthcare leaders believe integrating research with clinical care could have many benefits
- Speed and focus of research is perceived to be “out of sync” with fast-paced changes in healthcare delivery
- Training researchers to better embed within clinical operations is one important first step
- Elimination of current silos separating researchers and delivery system leaders is vital
- The work we have underway and planned is intended to attend to the above and ensure the relevance of health services research to the C-Suite

Questions & Discussion

Moderated by Jean Abraham, Wegmiller Professor &
MHA Program Director

#MHASymposium