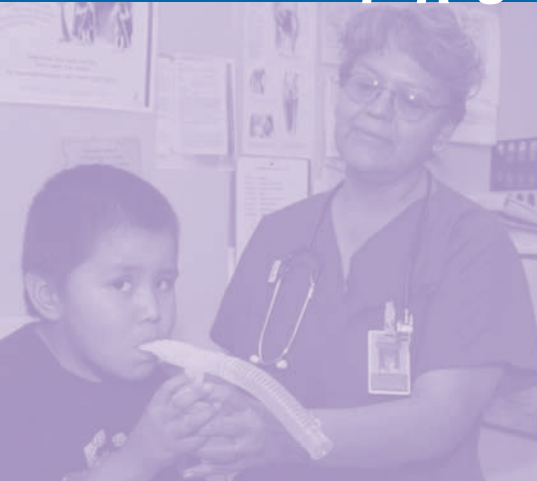


PROGRAM BRIEF



AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives—Update 2007



The mission of AHRQ is to improve the quality, safety, efficiency, and effectiveness of health care by:

- Using evidence to improve health care.
- Improving health care outcomes through research.
- Transforming research into practice.

Introduction

The mission of the Agency for Healthcare Research and Quality (AHRQ) is to improve the quality, safety, effectiveness, and efficiency of health care for all Americans. Toward this aim, AHRQ continues its support for research and other activities designed to improve quality and address disparities in health care for its priority populations, including American Indians and Alaska Natives (AI/ANs). This document updates a previously published (2006) program brief with new information on AHRQ activities specifically relevant to the AI/AN population.

Enhancing Knowledge To Improve Health and Health Care

Asthma Education Conference for Tribal Health Officers Serving the Aberdeen Area. The major goal of this September 2006 regional conference on asthma was to inform Northern Plains

tribal health agencies about the current state of knowledge, research, and treatment of asthma, its potential environmental health triggers, prevention strategies, and environmental improvement measures. Topics covered included exposures to everyday types of indoor and outdoor contaminants, such as environmental tobacco smoke, allergens and endotoxins, molds, insects, dust mites and other biological contaminants, chemical contaminants such as pesticides and formaldehyde, exhaust from wood-burning stoves, and motor vehicle exhaust. Conference participants included tribal health representatives and directors, Indian Health Service (IHS) staff, emergency medical workers, nurses, and pediatricians working with 18 tribes in a four-State region served by the Northern Plains Tribal Epidemiology Center. (Principal Investigator: David Osterberg, University of Iowa; Grant HS16435, 06/01/06-05/31/07)



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Survey of AI/AN Patient Experiences With Care. In collaboration with the Choctaw Nation Health Service Authority, AHRQ and the RAND Corporation developed an 81-question survey instrument to assess patients' experiences with Choctaw Nation health care facilities. The instrument will not only help establish benchmarks to track patients' experiences with care but also support the facilities in their efforts to evaluate the need for internal quality improvements. The survey is now publicly available for download at https://www.cahps.ahrq.gov/content/products/AI/PROD_AI_AIIntro.asp?p=1021&cs=216.

Developing Data and Research Capacity

North Carolina-American Indian Network Study of Clinical Outcomes.

This project brings together 54 providers, 21 of which are American Indian, with the goal of creating a research network of primary care providers who largely serve American Indian patients in Robeson County, North Carolina, a rural county that is home to most of the 50,000+ members of the Lumbee Tribe who live in the State. In addition to creating the network of primary care practices where disease- and tribe-specific data can be collected, researchers will estimate diabetes prevalence in adults and children as well as pilot data collection on processes of care for diabetes. The creation of the network, measurement of prevalence, and results of the pilot study will result in assessment of the needs for further work to improve the identification and care for diabetes in the community. (Principal Investigator: Bonnie Yankaskas, University of North Carolina at Chapel Hill; Grant HS15989, 08/01/06-07/31/08)

Building Health Services Research Capacity for Tribes in Montana and Wyoming (Infrastructure Development and Research). This continuation grant builds upon its earlier capacity-building success during which the Montana-Wyoming Tribal Leaders Council developed a shared data resource and research infrastructure for participatory research among a majority of the 10 Tribes it serves. The continuation project will further build capacity for health care research on the priority health issues identified by the Tribes and continue to support culturally appropriate health programs. Three new research studies are planned: (1) evaluation of interventions to promote healthy weight among women; (2) examination of factors that contribute to breast and cervical cancer outcomes; and (3) design and implementation of a "healthy reservations" model program for system-wide health improvement on reservations. (Principal Investigator: Gordon Belcourt, Montana-Wyoming Tribal Leaders Council; Grant HS14034, 9/30/03-9/29/11)

Implementation and Promotion of Health Information Technology Tools and Processes in the Indian Health System. AHRQ is assisting the Indian Health Service in enhancing its health information systems to improve quality of care and patient safety. For example, AHRQ is:

- Supporting development, enhancement, and implementation of a graphical user interface for the current IHS information system, the Resource and Patient Management System (RPMS). This interface to the RPMS electronic health record (EHR) permits direct provider order entry and documentation, thus improving data quality and patient

safety. It also embeds elements of electronic decision support for IHS care providers.

- Assisting IHS in improving outcomes in chronic illness care and preventive services through:
 - Building an infrastructure for quality improvement and collaborative learning.
 - Adapting and implementing the Chronic Care Model in Federal, tribal, and urban facilities. The model was developed by the Improving Chronic Illness Care Program of the Macoll Institute for Healthcare Innovation.
 - Maximizing functionality of a new RPMS component, the Integrated Case Management Application, or iCARE. This tool is designed to integrate multiple perspectives on clinical and community care in a single software application to enhance the ability to manage patient populations.
- Providing ongoing funding and technical assistance for an evaluation of the deployment and impact of RPMS-EHR. AHRQ is assisting the evaluation team at the Urban Indian Health Institute (part of the Seattle Area Epidemiology Center) and Harvard University with evaluation methodology, design, and analysis.

Support for IHS Optometry Program Services Survey. AHRQ is providing consultation and technical assistance to IHS in the development of a survey instrument that will gather data on optometric services delivery by IHS providers. AHRQ staff helped design the survey and refine the questionnaire in cooperation with the IHS survey committee. AHRQ will collect and compile the data from an estimated 100

health care sites and provide the results to IHS for analysis.

Building Relationships and Fostering Collaborative Activities

International Meeting on Indigenous Child Health. This collaborative conference will focus on innovative clinical care models and community-based public health approaches for children and youth in First Nations, Inuit, Metis, American Indian, and Alaska Native communities. The conference will be planned and jointly sponsored by a number of U.S. and Canadian organizations and agencies. While the health care systems in the United States and Canada differ, there are many similarities in terms of providing culturally effective care to indigenous children and youth. Therefore, this conference will strive to bring exposure to successful models of care and unique research implemented at the community level, disseminate effective strategies, and provide opportunities for providers to gain valuable skills that can be utilized immediately. (Principal Investigator: Sunnah Kim, American Academy of Pediatrics; Grant HS16753, 12/01/06-11/30/07)

Central Kenai Peninsula Health Collaborative Technology. This project assessed the status of technological resources of a federally qualified health center for uninsured and underinsured patients, a mental health clinic, a long-term care provider, and a local acute care hospital serving a population of Alaska Natives, disabled, and poor patients. The study team prepared a plan for implementing health information technologies to allow for area-wide electronic communications



and connectivity with an electronic health record and a Web-based data system for patient support. (Principal Investigator: Susan Caswell, Central Peninsula General Hospital; Grant HS14902, 09/30/04-09/29/06)

For More Information

Additional information on AHRQ's activities relevant to AI/ANs may be found in the AHRQ program brief, "AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives" (AHRQ Pub. No. 06-P021). The brief is available from the AHRQ Publications Clearinghouse by calling 800-358-9295 or sending an E-mail to AHRQPubs@ahrq.hhs.gov.

For details about the projects listed above and other AI/AN-related activities at AHRQ, contact:

Wendy Perry
AHRQ Senior Program Analyst for
AI/AN Health
540 Gaither Road
Rockville, MD 20850
E-mail: Wendy.Perry@ahrq.hhs.gov



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