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- Susan C. Hedrick, PhD
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- David H. Hickam, MD, MPH
Associate Director, Portland
- David H. Au, MD, MS
- Katharine A. Bradley, MD, MPH
- Chris L. Bryson, MD, MS
- Edmund F. Chaney, PhD
- Michael K. Chapko, PhD
- Jason A. Dominitz, MD, MHS
- Vincent S. Fan, MD, MPH
- Daniel R. Kivlahan, PhD
- Chuan-Fen Liu, PhD
- Matthew L. Maciejewski, PhD
- Charles C. Maynard, PhD
- Gayle E. Reiber, MPH, PhD
- Kevin L. Sloan, MD
- Anne E. Sales, MSN, PhD
- Bevan Yueh, MD, MPH
- Andrew Zhou, PhD

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"Dog Tags": Portraits of Veterans and Pets
Photographs by Don Crowe



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Northwest Center for Outcomes Research in Older Adults: A VA HSR&D Center of Excellence

Veterans Affairs Puget Sound Health Care System (VAPSHCS) and the Portland VA Medical Center (PVAMC)

Assessing the Impact of Alcohol Use

When Kathy Bradley, MD, MPH, was a resident in internal medicine, she was astonished to spend so much time taking care of inpatients whose alcohol use had resulted in cirrhosis of the liver, gastrointestinal bleeding, or trauma, and yet be taught almost nothing about prevention of alcohol-related morbidity and mortality. Over the past 12 years, as an HSR&D Core Investigator, Dr. Bradley has worked with Daniel Kivlahan, PhD, Director of the VA Center for Substance Abuse Treatment and Education (CESATE), to develop a research program aimed at decreasing the adverse impact of alcohol misuse on the health of VA patients.

Dr. Bradley's initial research efforts were focused on developing practical methods to identify VA patients at risk for alcohol-related morbidity and mortality. Her team described and validated a 3-item questionnaire, the AUDIT-C, to screen for alcohol misuse in male and female VA patients^{1,2}. Unlike earlier questionnaires that screened for alcohol abuse and dependence, the AUDIT-C identifies patients drinking at unhealthy levels (so-called risky drinking), as well as alcohol abuse and dependence. Dr. Bradley and her team worked with the Office of Quality and Performance (OQP) to implement the AUDIT-C nationwide in the VA in 2004. Through collaborations with national CPRS leaders and OQP, Dr. Bradley's team helped disseminate a self-scoring AUDIT-C clinical reminder in 2003. During the first year of use, this clinical reminder was used over 1.5 million times, and 93% of VA patients were screened for alcohol misuse with

22% screening positive. Dr. Bradley now has an ongoing study funded by the National Institute of Alcohol Abuse and Alcoholism that is evaluating whether the AUDIT-C is also an effective screening test in non-VA primary care settings.



During the past 5 years, funded by a K23 Award from the NIAAA, Dr. Bradley's team has conducted a number of studies aimed at understanding current VA practices regarding care provided to patients with alcohol misuse. Brief alcohol counseling by primary care providers can decrease drinking and improve the health of patients with alcohol misuse, but Dr. Bradley's team has demonstrated that, unfortunately, most VA patients with alcohol misuse report receiving no advice about alcohol use³, although most recognize they drink more than they should and have considered change⁴. In a study of audiotaped primary care appointments of VA outpatients who screened positive for alcohol misuse⁵, Dr. Bradley's team found that alcohol use was mentioned in 57% of appointments, but advice was offered in only 21%. An ongoing ethnographic study of those audiotapes is identifying specific barriers to effective alcohol counseling that may be addressed by educational programs.

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"Soul Catcher," a Northwest Coast Indian symbol used to ward off spirits that brought physical or mental illness



Marvin Oliver, artist

Featured Research

“Alcohol misuse is an important cause of preventable morbidity and mortality in Veterans.”

—Kathy Bradley

Continued from page 1

Most of Dr. Bradley’s current research focuses on ensuring that VA patients get the help they need with their drinking. When a patient screens positive for alcohol misuse, providers first need to assess the severity of the patient’s alcohol-related risks. As a primary care provider herself, Dr. Bradley appreciates the challenges of addressing alcohol misuse given the many competing agendas during brief appointments. Preliminary research suggests that the AUDIT-C score can help providers assess patients’ alcohol-related risks. Dr. Bradley is therefore conducting several studies to help “calibrate” the AUDIT-C score—from 0 for non-drinkers to 12 for the heaviest drinkers—as a marker of alcohol-related risk. Her team has shown that AUDIT-C scores 8-12 are associated with increased mortality in VA outpatients⁶, and is evaluating the association of AUDIT-C scores with adverse drug events with a small grant from the University of Washington Alcohol and Drug Abuse Institute. A recently funded HSR&D IIR will allow her team to evaluate other adverse health outcomes associated with alcohol misuse in VA outpatients, especially those with chronic disease, and she has proposals pending to evaluate the association between AUDIT-C scores and surgical outcomes.

Dr. Bradley’s research group is also conducting a study, initially funded by a Robert Wood Johnson Generalist Physician Faculty Scholars Award, to evaluate a CPRS clinical reminder that her team developed to support brief alcohol counseling by VA primary care providers. In her role as Co-Clinical Coordinator of the Substance Use Disorders (SUD) QUERI, her team is also evaluating the Alcohol Counseling Clinical Reminder in another VISN. In addition, her team has an ongoing collaboration with OQP to study national performance monitoring related to alcohol screening and counseling by comparing results of medical record reviews to patient reports on the national Survey of the Health Experiences of Patients (SHEP).

Dr. Bradley, who was Director of Women’s Health at VA Puget Sound 1995-2000, continues to collaborate with other VA women’s

health providers on secondary analyses of data collected during her HSR&D-funded Veteran Women’s Alcohol Problems Study (1997-2000). These collaborations have recently resulted in three articles in the upcoming special issue of *JGIM* on the health of women veterans.

Dr. Bradley is a clinician and investigator at VA Puget Sound Health Care System and an Associate Professor of Medicine at the University of Washington. She is also Co-Director of the HSR&D MD post-doctoral fellowship program and was recently recognized for her mentorship by the University of Washington Robert Wood Johnson Clinical Scholars Program. She can be reached at Katharine.Bradley@va.gov.

¹Bush KR, Kivlahan DR, McDonell MB, Fihn SD, Bradley KA. The AUDIT alcohol consumption questions (AUDIT-C): An effective brief screening test for problem drinking. *Arch Intern Med*, 1998; 158:1789-1795.

²Bradley KA, Bush KR, Epler AJ, Dobie DJ, Davis TM, Sporleder JL, Maynard C, Burman ML, Kivlahan DR. Two Brief Alcohol Screening Tests from the Alcohol Use Disorders Identification Test (AUDIT): validation in a female VA patient population. *Arch Intern Med*, 2003;163:821-829.

³Burman MB, Buchbinder MB, Kivlahan D, Broglio K, Zhou XH, Merrill J, McDonell M, Fihn SD. Alcohol-related Advice for VA Primary Care Patients: Who Gets it, Who Gives it? *J Stud Alcohol*, 2004;65:621-630.

⁴Williams EC, Kivlahan DR, Saitz R, Merrill JO, Achtmeyer CE, McCormick KA, Bradley KA. Readiness to change in primary care patients who screen positive for alcohol misuse. *Annals Fam Med*, in press.

⁵Bradley KA, Epler A, Bush K, et al. Alcohol-related discussions during general medicine appointments of patients who screen positive for at-risk drinking. *J Gen Intern Med* 2002;17:315-327.

⁶Bradley, KA, Maynard, C, Kivlahan DR, McDonnell MG, Fihn SD. The relationship between alcohol screening questionnaires and mortality among male veteran outpatients. *J Stud Alcohol*, 2001;62:826-833.

“Dog Tags”: Portraits of Veterans and Pets

Photographs by Don Crowe

“Dog Tags” is a photographic essay of veterans and the special relationships they share with pets. Captured in natural light, these black and white portraits reveal an animal-human connection filled with intimacy, candor and sometimes humor. The theme has poignancy: men and women who served their country and the animals that serve them with their allegiance and love.



This collection was inspired and partly supported by the Pets for Vets program at the San Francisco VA Medical Center that provides shelter animals gratis to veterans. The program recognizes the invaluable benefits of owning a pet.

The subjects’ tours of duty span from World War II to the Gulf War and include all branches of the military. Don Crowe’s photographs celebrate the diversity of veterans and the companionship brought to their lives by a pet.

Studies have shown that pets help diminish anxiety, stress, pain and blood pressure and increase mobility and muscular strength in patients.

“These men and women who served in the military are a special sort of people who really have a deep connection to their pets,” said Crowe. “I can feel this special bond and I know others will be able to see and feel it in these pictures.”



For more information about Dog Tags or the Pets for Vets program, contact Don Crowe at: don@doncrowephotography.com

<http://www.doncrowephotography.com>
(Images courtesy of Don Crowe)

Currently on view in the offices of HSR&D is the exhibition, “Dog Tags,” on loan from the photographer.

Highlights from the Research Front

Staff Updates



Margaret Collins received her PhD from the department of Speech and Hearing Sciences at the University of

Washington in December 2005. Her thesis was entitled, "Subjective Hearing Complaints and Sentence Recognition Performance for Listeners with Post-traumatic Stress Disorder (PTSD)." Margaret found that normal-hearing veterans with PTSD reported hearing problems that were clinically important. These complaints were not related to performance on a speech recognition in noise task, but were strongly associated with depression level. She is looking forward to having free time again. Congratulations Margaret!

Philip Ullrich, PhD, joined us in November 2005 as the Implementation Research Coordinator for the Spinal Cord Injury QUERI. Phil trained at the University of Iowa, and spent the last 3 years at UW.



HSR&D bade farewell to **Connie Nakano** on January 20, 2006. Connie came to HSR&D in August 2003 as our Center's first IRB Coordinator. We will miss her innovative ideas, as well as her pleasant conversation and sense of humor. Best wishes to Connie as she begins a new adventure in Atlanta, working with the CDC as IRB Administrator.



Clostridium difficile is a leading cause of outbreaks of intestinal disease that occurs in hospitals. These types of infections are important, as they increase hospital care and costs and can be difficult

to eradicate from hospital wards. **Lynne McFarland** is once again on a mission to track down the obscure sources responsible for spreading this ubiquitous, yet secretive, bacteria. She became world-renowned when she discovered how *C. difficile* was transmitted at a local Seattle hospital in 1989. Now, 15 years later, there is an ongoing outbreak of *C. difficile* at VA Puget Sound. *C. difficile* has become so engrained in the "culture" of our hospital wards that we often don't recognize that a new threat is on our hands. In a pilot study recently funded by the Epidemiologic Research and Information Center (ERIC), McFarland is comparing people with the disease to those who did not get it to determine risk factors and control measures for this outbreak.

* * *

Matt Maciejewski's VA Prescription Drug Copayments and Veterans with Diabetes or Hypertension (RxCopay) study addresses the effect of the February 2002 VA medication copayment increase from \$2 to \$7 for a 30-day prescription fill on veterans with diabetes and/or hypertension. Outcomes of interest are medication adherence, clinical measures such as blood pressure and HbA1c, and health care costs and utilization for diabetes and hypertension patients from Seattle, Hines, Little Rock and Ann Arbor VAMCs.



The effect of medication copayment increases has clear policy and health implications, especially in VA where veteran patients tend to have low incomes, poor health status, and multiple prescriptions. Matt has a long-standing interest in the economics of diabetes, and the current study proposed methodological improvements over an existing, more general study of the copayment increase. The VA's system-wide medication copayment change created a natural experi-

ment that supports the quasi-experimental study design and enables better validity of study results. The study team—Co-Investigators Fen Liu, Chris Bryson, John Fortney (Little Rock), Kevin Stroupe (Hines) and Sarah Krein (Ann Arbor), and data analyst Mark Perkins—is still generating results related to how the copayment increase affected patient adherence to diabetes and hypertension medications.

Matt describes the research as including some funky longitudinal methods that are pushing him to learn new methods. He notes that observational studies need to become a relic of the past when longitudinal datasets couldn't be built and computers couldn't process more complex methods. Now that those two barriers are largely gone and the need for identifying the causal effect of non-randomized treatments grows, longitudinal data and methods are the future (to paraphrase from The Graduate). To this point, the longitudinal methods and graphical approaches to thinking about the data are the most interesting aspects of this study. "There are clear implications for our research but we don't know what they are yet, and there are clear next projects to be conducted but we are not giving those away!"

* * *

Chuan-Fen Liu and Yu-Fang Li are co-PIs on a new study evaluating the association between organizational changes and cost of patient care in VA hospitals. The Cost of Inpatient Nursing Services

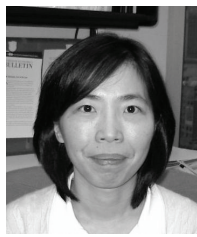


Chuan-Fen Liu

in VA (COINS) study is a follow-up to Anne Sales' current Nurse Staffing and Patient Outcomes in VA (NSPO) study. In NSPO, the primary objective is to examine the relationship between nurse staffing, job satisfaction, nursing care processes and patient outcomes in 125 VA facilities providing acute inpatient care. NSPO builds on a body of evidence on associations between nurse staffing structures and patient outcomes outside the VA. However, as yet there is a dearth of empirical research on costs associated with changes in the organization of nursing care at the facility and unit level.

COINS addresses two specific questions:

Highlights from the Research Front



Yu-Fang Li

(1) Are units with richer nursing skill mix (greater proportion of RN hours to total nursing hours) more efficient than units with poorer nursing skill mix (where efficiency is measured as total cost per patient bed day of care)? and

(2) Are facilities with nurse executive line authority for nurse staffing in medical/surgical units more efficient in these units than facilities without nurse executive line authority for nurse staffing? The study will include 314 inpatient acute medical/surgical units in 118 VA medical centers with approximately 90,000 patients admitted during the study period, February to June 2003. COINS will draw on patient, unit, and facility data from the NSPO study, information on nurse executive line authority from NSPO interviews and a 2003 survey of nurse executives fielded by the VA Office of Nursing Services, and cost data from the VA's national Decision Support System (DSS) files. VA is unique in having a central source for workload and cost data that allows analysis at the unit as well as facility level.

Recent Publications

Allen E, **Zerzan J**, Choo C, Shenson D, **Saha S**. Teaching systems-based practice to residents by using independent study projects. *Acad Med*. 2005;80:125-8.

Back AL, **Li YF**, **Sales AE**. Impact of palliative care case management on resource use by patients dying of cancer at a Veterans Affairs medical center. *J Palliat Med*. 2005;8:26-35.

Belza B, **Steele BG**, Cain K, **Coppersmith J**, Howard J, Lakshminarayan S. Seattle Obstructive Lung Disease Questionnaire: sensitivity to outcomes in pulmonary rehabilitation in severe pulmonary illness. *J Cardiopulmonary Rehabil*. 2005;25:107-14.

Boyko EJ, **Fihn SD**, Scholes D, Abraham L, Monsey B. Risk of urinary tract infection and asymptomatic bacteriuria among diabetic and nondiabetic postmenopausal women. *Am J Epidemiol*. 2005;161:557-64.

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atic review of the evidence. *Clin Rehabil*. 2005 Dec;19(8):819-33.

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Chew LD, **Nelson KM**, **Young BA**, **Bradley KA**. Association between alcohol consumption and diabetes preventive practices. *Fam Med*. 2005;37:589-94.

Cisler RA, **Kivlahan DR**, Donovan D, Mattson ME. Assessing nondrinking outcomes in combined pharmacotherapy and psychotherapy clinical trials for the treatment of alcohol dependence. *J Stud on Alc. Supplement* 2005;110-18.

Curtis JR, Engelberg RA, Wenrich MD, **Au DH**. Communication about palliative care for patients with chronic obstructive pulmonary disease. *J Palliat Care*. 2005 Autumn;21(3):157-64.

Davis GE, Schwartz SR, Veenstra DL, **Yueh B**. Cost comparison of surgery vs organ preservation for laryngeal cancer. *Arch Otolaryngology — Head & Neck Surg*. 2005;131:21-26.

Davis GE, **Yueh B**, Walker E, Katon W, Koepsell TD, Weymuller EA. Psychiatric distress amplifies symptoms after surgery for chronic rhinosinusitis. *Arch Otolaryngology — Head & Neck Surg*. 2005;132:189-96.

Dobscha SK, Corson K, Solodky J, **Gerrity MS**. Use of videoconferencing for depression research: enrollment, retention, and patient satisfaction. *Telemed J and E-Health*. 2005; 11:84-9.

Fan VS, Burman M, **McDonnell MB**, **Fihn SD**. Continuity of care and other determinants of patient satisfaction with primary care. *J Gen Intern Med*. 2005;20:226-33.

Fan VS, **Reiber GE**, **Diehr P**, Burman M, **McDonnell MB**, **Fihn SD**. Functional status and patient satisfaction: a comparison of ischemic heart disease, obstructive lung disease, and diabetes mellitus. *J Gen Intern Med*. 2005;20:452-9.

Fortney JC, **Maciejewski ML**, Warren JJ, Burgess JF. Does improving geographic access to VA primary care services impact pa-



HSR&D welcomes **Michael Donahue** to his new role as IRB/Pre-Awards Coordinator. He started in October 2005. He has worked in the research field for 10 years, most recently as Project Manager for Bevan Yueh here in HSR&D. He wants it noted that the camera adds at least 10 pounds.

Three recent additions to our core administrative staff are **Dwight Calvert**, computer technician, and **Emily Hart** and **Jared LeClerc**, staff assistants.

Dwight moved to Washington to attend ITT Technical Institute after living in Montana for 18 years. He has been working as Computer Technician for the VA since completing his first degree in Networking. Dwight is currently working on his degree in Information Systems Security.



Emily is a graduate of Central Washington University. Before coming to HSR&D, she worked at a veterinary hospital for four years. Emily loves animals, with black labradors, a Siamese cat, and a Chinese box turtle at home.



Jared is new to both Seattle and jaywalking laws. His primary responsibilities at HSR&D include IRB Coordinator support and facilities management. He recently returned from Peace Corps service in Mali, West Africa, and is unfazed by slow elevators.



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Fellows' Profiles

Funding Facts

Our Center had a record number of submissions for the December 2005 grant deadline!!

New proposals: 3 IIRs
1 ACDA
2 RR&D

Resubmissions: 5 IIR/NRIs

Total: 11 submissions

Funding Due Dates

HSR&D Merit Review IIR and NRI Proposals:
June 15, 2006

Career Development Awards:
June 15, 2006
LOIs: April 15, 2006

Career Scientist Awards:
June 15, 2006

Newly Funded Projects

Seattle

- ◆ Cost of acute inpatient nursing services in VA (ECI 04-186). Chuan-Fen Liu, PI (2005-2007)
- ◆ Hearing aid effectiveness after aural rehabilitation (HEAR) trial (SLI 05-265). Bevan Yueh, PI (2006-2009)

Portland

- ◆ Steven Dobscha, Core Investigator, Portland affiliate received Advanced Career Development Award (RCD 04-129). 7/05-6/08
- ◆ Improving the treatment of chronic pain in primary care (PMI 03-195). Steven Dobscha, PI (2005-2009)

Andrew Brunskill, MB, ChB, MPH, earned his BSc in Psychology at University of Edinburgh, Scotland and his MB, ChB (the British MD degree) at University of Newcastle upon Tyne, Eng-



land. After a fellowship, he undertook pediatric training in New Zealand and Australia which he completed in the USA. He earned an MPH in epidemiology at University of Washington and then worked briefly at CDC in Atlanta and University of Iowa in Developmental Pediatrics before returning to the Northwest to work with Group Health Cooperative. Subsequently he worked largely in public health care plans with the State of Washington, ending as medical director of the state uniform medical plan, with short intermissions doing public health at Oxford and as a medical director in adverse event surveillance with a pharmaceutical firm. He is presently a fellow in informatics and in the "post prelim" phase of a PhD in Health Services. His dissertation topic is in modeling diabetes progression and optimizing interventions. Andrew and his wife, Clare, a primary teacher, have two daughters who are graduate students themselves in machine learning and information science. Andrew and Clare enjoy hiking and last summer spent time looking for dolmen, the next question being what you do when you find them!

Elya E. Prystowsky was born and raised in the San Francisco Bay Area. She obtained her undergraduate degree in Environmental Sciences and Spanish at Tulane University in New Orleans, after which she earned a master's degree in Population and International Health at Harvard School of Public Health in Boston. In 2002, she moved to Seattle to pursue a PhD in epidemiology at the UW School of Public Health and Community Medicine.

Elya's research interest is in the epidemiology of sexually transmitted diseases. Growing up in the San Francisco Bay Area in the 1980s, Elya had a front row seat to the rapid and frightening onset of the HIV epidemic. Her father was among the first clinicians to

report to the CDC an unexplainable increase in the incidence of Kaposi's sarcoma among young homosexual males in this area. Elya wrote her high school thesis on the HIV epidemic in homosexual males in San Francisco in the 1980s. This was the beginning of her career in STD epidemiology.

In New Orleans, Elya investigated the interaction between extra pulmonary tuberculosis and HIV infection. While in Boston, she studied clinical manifestations of different types of human papillomavirus. To complete her dissertation work at UW, she was awarded an STD/AIDS Research Training Fellowship from the Center for AIDS and STDs. She was also accepted into the graduate certificate program for STDs and AIDS at UW. Her dissertation is a study of urinary tract infections in post-menopausal women at Group Health Cooperative. The purpose of this project is to evaluate the impact of sexual intercourse on risk of urinary tract infection in older women.

After Elya completes the PhD program at UW, she plans to continue her research on sexually transmitted infections, focusing on female populations. Her goal is to combine her International Health Degree with her epidemiology degree and work abroad in a developing country. In this setting she would like to be both a teacher and a researcher, and to focus on the specific public health needs of the community.

Between dissertation work and planning her wedding with her fiancé, Ryan, Elya does not have much free time. What free time she does have is devoted to working on the house with Ryan, spending time with her friends and family, and playing water polo with the Seattle Otters. Elya, Ryan, their dog, Jazz, and two cats, Charley and Lee Roy, live happily in their home in Seattle.



Elya and Ryan at home with their animals

Recent Publications

Continued from page 5

tients' patterns of utilization and costs? Inquiry: A Journal of Medical Care Organization, Provision and Financing. 2005;42:29-42.

Fortney JC, Steffick DE, Burgess JF Jr, **Maciejewski ML**, Petersen LA. Are primary care services a substitute or complement for specialty and inpatient services? Health Serv Res. 2005 Oct;40(5 Pt 1):1422-42.

Jackson SL, Scholes D, **Boyko EJ**, Abraham L, **Fihn SD**. Urinary incontinence and diabetes in postmenopausal women. Diabetes Care. 2005;28:1730-8.

Katon WJ, Schoenbaum M, Fan MY, Callahan CM, Williams J Jr, Hunkeler E, Harpole L, **Zhou XH**, Langston C, Unutzer J. Cost-effectiveness of improving primary care treatment of late-life depression. Arch Gen Psychiatry. 2005 Dec;62(12):1313-20.

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Maynard C, **Lowy E**, Wagner T, **Sales AE**. Utilization of drug-eluting stents in the Veterans Health Administration. Am J Card. 2005;96:218-20.

McFall M, Saxon AJ, Thompson CE, Yoshimoto D, Malte C, Straits-Troster K, Kanter E, **Zhou XH**, Dougherty CM, **Steele B**. Improving the rates of quitting smoking for veterans with posttraumatic stress disorder. Am J Psychiatry. 2005;162:1311-9.

Mozaffarian D, **Bryson CL**, Lemaitre RN, Burke GL, Siscovick DS. Fish intake and risk of incident heart failure. J Am Coll Cardiol. 2005;45:2015-21.

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Parimon T, Madtes DK, **Au DH**, Clark JG, Chien JW. Pretransplant lung function, respiratory failure, and mortality after stem cell transplantation. Am J Resp & Crit Care Med. 2005;172:384-390.

Qin G, Hsu YS, **Zhou XH**. New confidence intervals for the difference between two sensitivities at a fixed level of specificity. Stat Med. 2005 Dec 13:[Epub ahead of print]

Reiber GE, **Raugi GJ**. Preventing foot ulcers and amputations in diabetes. Lancet. 2005 Nov 12;366(9498):1676-7.

Rudolph RE, **Dominitz JA**, Lampe JW, Levy L, Qu P, Li SS, Lampe PD, Bronner MP, Potter JD. Risk factors for colorectal cancer in relation to number and size of aberrant crypt foci in humans. Canc Epidemiol, Biomarkers and Prevention. 2005;14:605-8.

Sales AE, **Sharp ND**, **Li YF**, **Greiner GT**, **Lowy E**, Mitchell P, Sochalski JA, Cournoyer P. Nurse Staffing and Patient Outcomes in Veterans Affairs Hospitals. J Nursing Admin. 2005;35:459-66.

Stern RE, **Yueh B**, Lewis C, Norton S, Sie KC. Recent epidemiology of pediatric cochlear implantation in the United States: disparity among children of different ethnicity and socioeconomic status. Laryngoscope. 2005;115:125-31.

Takahashi TA, Johnson KM, **Bradley KA**. A population based study of HIV testing practices and perceptions in 4 U.S. states. J Gen Intern Med. 2005;20:618-22.

Tuteja AK, Talley NJ, Joos SK, Woehl JV, **Hickam DH**. Is constipation associated with decreased physical activity in normally active subjects? Am J Gastroenterology. 2005;100:124-9.

Zhou XH, Dinh P. Nonparametric confidence intervals for the one- and two-sample problems. Biostat. 2005;6:187-200.

Zhou XH, Li SM. ITT analysis of randomized encouragement design studies with missing data. Stat Med. 2005 Nov 15:[Epub ahead of print]

HSR&D Northwest Center of Excellence Mission Statement

I.

To conduct research that addresses important health care problems and is of the highest scientific rigor.

II.

To provide high caliber training in health services research.

III.

To maintain collaborative ties with neighboring research institutions.

IV.

To provide prompt and useful assistance in response to requests from the VA Puget Sound Health Care System, Seattle and VA Headquarters.

V.

To maintain a balanced mix of funding support from multiple sources.

Investigator Profile

Dr. Susan Hedrick joined the HSR&D Center in 1983. She became Associate Director in 1993 and was named the first HSR&D Associate Research Career Scientist in the VA in 1991. She is also Professor, Department of Health Services, School of Public Health and Community Medicine at the University of Washington. She received her PhD in Psychology, with a focus on health services research, from Michigan State University. She worked there with Dr. Sidney Katz, who conducted the first randomized controlled trials of community-based long-term care programs. Dr. Hedrick's research focus has continued to be the evaluation of outcomes of these programs including home care, adult day care, and, most recently, community-residential long-term care: assisted living and adult family homes. Community-residential care is a rapidly growing type of care with potential to provide cost-effective care while maximizing privacy and autonomy in a home-like setting. This type of care is primarily available at present to those who can pay out of pocket, and Dr. Hedrick is especially interested in programs that can make such care available to lower income persons. She led a study funded by the John A. Hartford Foundation of the pioneering Medicaid-funded assisted living program in Washington State. Most recently, she and colleagues Marylou Guihan, Michael Chapko, and Larry Manheim completed the evaluation of the first pilot demonstration of assisted living in VA. These studies have provided important information about residents and providers and the quality and cost of these promising but relatively unstudied programs.

She is currently leading a study assessing the VA's process for referring patients to long-term care programs. This project is designed to identify interventions that may

increase the likelihood that patients will be referred to community-based rather than institutional long-term care programs. Future studies will develop methods and conduct evaluations of promising interventions, including educational programs and single-



Susan, with husband, Ben, and their two dogs

point-of-entry referral systems, where all referrals go through a multidisciplinary committee for review.

At the University, she enjoys teaching a class entitled, "Society, Chronic Illness, and Disability," as it allows her to explore with graduate students important topics such as how our society defines and assesses these concepts and how our health care system could be improved to better treat people with chronic conditions.

Outside of work, she enjoys her Vashon Island home and garden with husband, Ben, and dogs, Spike and Tosca. Island activities include driving an antique tractor in the Strawberry Festival Parade, circumnavigating the Island on foot with friends and dogs, reading and dining with the 20-year-old Steilacoom Book and Dinner Club, cooking from the garden, and traveling east for the annual Midsummer Musical Retreat in Walla Walla, WA (www.musicalretreat.org).

Post-Doctoral Health Services Research Fellowships Available

The Northwest Center for Outcomes Research in Older Adults offers PhD postdoctoral fellowships in health services research in conjunction with the University of Washington. Fellows are expected to engage in full-time research on a publishable health services project, and to participate in related educational activities including selected course work at the University of Washington. Individuals with a PhD from a variety of disciplines are encouraged to apply. For eligibility and application instructions, please see our web site at: <http://www1.va.gov/pshsrd/page.cfm?pg=10>. The application deadline is **March 15, 2006** for fellowship beginning **October 1, 2006**.

Affiliate Investigators

Bradley Anawalt, MD
Charles D. Blanke, MD
Edward Boyko, MD, MPH
Paula Diehr, PhD
Barry Goldstein, MD, PhD
Kenric Hammond, MD
Margaret Hammond, MD
Karin Nelson, MD
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