IFH: RESPONSE AND SUCCESS AS PARTNER IN MULTI-SITE NIH ACUPUNCTURE RESEARCH STUDY

Matthew Beyrouty, MPA; Donna Mah, DACM, MSW; Arya Nielsen, PhD; Phoebe Rosenheim, MPH; Estefhany Soto Cossio, MD; Raymond Teets, MD

HEAL Back In Action (BIA) Research Trial: Implementation at IFH

HEAL Back in Action is a pragmatic trial examining acupuncture for chronic lower back pain in adults age ≥65

- Funded by NCCIH and the Helping End Addiction Long-term (HEAL) Initiative. Award No. 1UH3 AT010739
- IFH partnered with Kaiser Permanente (WA & N. CA) and Sutter Health (N. CA)
- 3 arms: Standardized Acupuncture, Enhanced Acupuncture, Usual Care
- IFH unique as FQHC site, and with acupuncture intervention integrated on site

CHALLENGES

- Covid-19 Pandemic
- Older Adults and Pain
- Urban Setting
- Complexity of Research Design
- Limited Access to Acupuncture Intervention

OPPORTUNITIES

- Expand Awareness
- Forge Collaboration with Multi-Site Partners and NIH
- Facilitate Patient Access to Research & Care

RESPONSE AND SOLUTIONS

LEVERAGE & ADAPT

- Prior Acupuncture Research experience: e.g., ADDOPP II, GAPYOGA, BIA Pilot, plus IFH Acupuncture programs
- Recruit Participants through direct outreach & medical provider referrals

INTEGRATION & ACCESS

- Integrate Acupuncture Intervention within or close to Participants’ Home Medical Site
- Collaborate with IFH Clinic and Site Administration for seamless, consistent delivery of patient care

TECHNOLOGY INNOVATION

- EPIC build
  - Embed scheduling and treatment record in EMR
  - Data share from EMR to research record
- Redcap
  - Streamline clinic ops communications

HEALTHCARE DELIVERY

- Patients at IFH utilized & appreciated acupuncture
- Acupuncture intervention is compatible with Primary Care Model of referral to specialty care

IMPLICATIONS

- IFH as STAKEHOLDER
  - IFH as FQHC in NIH, multi-site research study
  - Advanced Healthcare IT
  - Expanded offerings in integrative health, non-pharm intervention
  - FQHC voice included in CMS policy considerations

INQUIRY AND DISCOVERY

- What factors contribute to patient participation in research (e.g., access, recruitment & retention)
- Can non-pharm therapies be made routinely available to treat pain, e.g., acupuncture, and expand models of patient care
- How can research be more inclusive of a broader population base and what are the considerations to design and implementation

IMPORANCE OF FQHC PARTICIPATION IN MULTI-SITE RESEARCH

- Research plays a role in the advancement of healthcare equity and social justice
- HEAL BIA intersects the need to offer non-pharmaceutical therapies for pain, ensure quality care for older adults and provide access to care
- Implications, re: Design and Implementation:
  - Reflect context and reality of participants’ environment and concerns
  - Focus recruitment on referrals from participants’ trusted providers
  - Ensure enrollment process and research participation is patient-centered

NUMBERS

- Total Number of Sessions: 313
- Number Weekly Clinics: 6
- Total Appointments Scheduled: 1,210, of which 920 were attended (76%)
- Total No Show: 123 (10%)
- 124 enrolled, 212 patients screened eligible, 139 providers referred, 576

TRIAL TOTAL N = 807
IFH accounts for:
A: 15% of total N
B: 52% of Hispanic total of 87
C: 44% of Education HS total of 122
D: 33% of BIPOC total of 273
E: 100% of Spanish-speaking participants total of 33

IFH AS STAKEHOLDER

- IFH as FQHC in NIH, multi-site research study
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THE INSTITUTE FOR FAMILY HEALTH

- Family Health Center of Harlem
- Urban Setting
- Older Adults and Pain
- Complex Design and Implementation

IFH CLINIC SITES

- Institutes for Family Health at 27th Street
- Ginger Street
- Medical Director
- Nurse Manager
- Assistant Nurse Manager
- Research Acupuncturist: Lila Administration
- Research Acupuncturist: Lila Administration
- Research Acupuncturists: Lila Administration

THE DISSEMINATION CENTER FOR HEALTH SYSTEMS RESEARCH

- Kaiser Permanente Washington Health Research Institute
- Sutter Health Research Development & Dissemination Center for Health Systems Research