

SF Bay Area Collaborative Research Network

A partnership of community clinicians, practices and UCSF

SF Bay CRN eNews – Winter, 2018

Dear Colleagues and Friends,

Welcome to the San Francisco Bay Collaborative Research Network (SFBayCRN) eNews. SFBayCRN is UCSF's primary health care practice-based research network, supported by the Clinical and Translational Science Institute. We offer [free initial consultations](#) on practice-based research issues for our members. If you are interested in learning more about

SAVE THE DATE: Friday, May 11th

SFBayCRN Annual Meeting at the Presidio

Please join us for our Annual Meeting, Friday May 11th at the Presidio's Golden Gate Club in San Francisco. This year, our meeting will be an all-day symposium addressing the intersection of community-based, practice-based, and policy-based research. The meeting will include presentations on the role of health systems and policy-makers in evaluating and addressing the impact of cannabis legalization; regional population health initiatives aspiring to identify and address community needs with geocoded data from multiple sources, and unleashing the potential of eHealth and EHR-embedded interventions to support more effective clinical care. Registration for the meeting will open soon.

SFBayCRN Research Updates:

"Connection to Health" enters new phase with funding from TRDRP

For the last two years, SFBayCRN has worked closely with [La Clinica de la Raza](#), [LifeLong Medical Care](#), and [Contra Costa Health Services](#) in the East Bay on a 5-year NHLBI-funded study to address diabetes care in the context of social and behavioral determinants of health. While this work is ongoing, we have secured a new **"High Impact Pilot Award"** from California's



SFBayCRN, or if you have a story you would like us to include in an upcoming newsletter, please contact our navigator, [James Rouse Iñiguez, MA](#) or visit: www.sfbaycrn.org. You may follow us on Twitter at @UCSF_CCE.

Best Regards,
Mike Potter, SFBayCRN Director
James Rouse Iñiguez, SFBayCRN Navigator

For more information, [contact our navigator](#) or check our [website](#).



[Tobacco-Related Disease Research Program \(TRDRP\)](#) to adapt the program for a community health center based smoking cessation initiative to be called **Connection to Health for Smokers**.



New project to explore EHR data sharing across health systems in San Francisco

San Francisco was recently selected as one of over 50 cities worldwide, including 4 cities in the United States, to participate in the [Bloomberg Philanthropies “Healthy Cities Partnership”](#).

Locally, the project is led by the San Francisco Department of Public Health and will focus on developing strategies for health systems to

better characterize, monitor, and respond to chronic disease priorities in San Francisco. Preliminary findings from an initial survey of local stakeholders will be presented and discussed at the **SFBayCRN Annual Meeting** on May 11th.

From Practice-Based Research to Clinical Practice:

Groundbreaking online clinical resources for advanced directives counseling

We are pleased to help get the word out about [PREPARE for Your Care](#), an online resource to help patients learn about and prepare for advanced healthcare directives. This evidenced-based tool features video stories in English and Spanish, PREPARE guides users as they explore their wishes and learn how to discuss them with family, friends, and medical providers. The website also offers PREPARE written pamphlets as well as a Toolkit to help put on a PREPARE Group Movie Event. These Movie Events can be used in group medical visits or in the community.

These resources are the product of many years of research by [Rebecca Sudore, MD](#), and her colleagues in the UCSF Division of Geriatrics. Development of PREPARE clinical practice tools were supported by the [Gordon and Betty Moore Foundation](#).



Research Survey for Primary Care Physicians in San Francisco:

Disparities in Abnormal Mammogram Follow-Up

Please keep an eye out for an email from [Dr. Leah Karliner](#) and her team at UCSF’s Division of General Internal Medicine. She plans to survey all in San Francisco to understand their experiences and perspectives on follow-up of abnormal mammogram results. **The survey will**

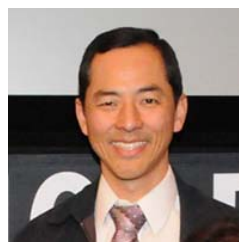
be distributed via email at the beginning of March, 2018. All eligible participants will be entered into a drawing for \$250 Amazon gift certificates. If you don’t complete it by email/online, you may also receive a paper survey in the mail by contacting Dr. Karliner.

Steering Committee Spotlight:

Troy Kaji, MD

In each newsletter we introduce you to one our SFBayCRN Steering Committee members. This month we are featuring **Troy Kaji, MD**, a family physician and Director of Ambulatory Medical Informatics at Contra Costa Health Services. In his “spare time”, he has studied and lectured widely on the history of medical care for Japanese Americans in the 1900’s. He has also been a longtime partner and supporter of

SFBayCRN. Welcome to the SFBayCRN Steering Committee, Dr. Kaji!



Dr. Troy Kaji

Featured SFBayCRN Research Abstract:

Handley MA, Quan J, Chao MT, Ratanawongsa N, Sarkar U, Emmons-Bell S, Schillinger D. Use of Complementary Health Approaches Among Diverse Primary Care Patients with Type 2 Diabetes and Association with Cardiometabolic Outcomes: From the SF Bay Collaborative Research Network (SF Bay CRN). J Am Board Fam Med. 2017;30(5):624-631.

PURPOSE: To describe use of complementary health approaches (CHAs) among patients with type 2 diabetes, and independent associations between CHA use and Hemoglobin A1c (A1C) and lower-density lipoprotein (LDL) cholesterol. **METHODS:** Participants were enrolled onto the SMARTSteps Program, a diabetes self-management support program conducted between 2009 and 2013 in San Francisco. At the 6-month interview, CHA use in the prior 30 days was estimated using a 12-item validated instrument. Demographic and diabetes-related measures A1C were assessed at baseline and 6-month followup. A1C and LDL values were ascertained from chart review over the study period. Medication adherence was measured using pharmacy claims data at 6 and 12 months. **RESULTS:** Patients (n = 278) completed 6-month interviews: 74% were women and 71.9% were non-English speaking. Any CHA use was reported by 51.4% overall. CHA modalities included vitamins/nutritional supplements (25.9%), spirituality/prayer (21.2%), natural remedies/herbs (24.5%), massage/acupressure (11.5%), and meditation/yoga/tai chi (10.4%). CHA costs per month were \$43.86 (SD = 118.08). Nearly one third reported CHA (30.0%) specifically for their type 2 diabetes. In regression models, elevated A1C (>8.0%) was not significantly associated with overall CHA use (odds ratio [OR] = 1.78; 95% confidence interval [CI], 0.7 to 4.52) whereas elevated LDL was (OR = 3.93; 95% CI, 1.57 to 9.81). With medication adherence added in exploratory analysis, these findings were not significant. **CONCLUSIONS:** CHA use is common among patients with type 2 diabetes and may be associated with poor cardiometabolic control and medication adherence.

To learn more about SFBayCRN, or if you have a story you would like us to include in an upcoming newsletter, please contact our [navigator](#), or visit: www.sfbaycrn.org. You may follow us on Twitter at [@UCSF_CCE](#). We hope to see you at the Presidio on May 11th!