I. FIRST YEAR ACTIVITIES AND ACCOMPLISHMENTS

The three-year goal of the Collaborative is to create a sustainable program of high quality health services research focusing on issues in Harris County that affect underserved populations. Specific objectives are:

1) Organize research teams to conduct existing projects identified by the community, develop new project ideas, and seek research funding.

2) Develop and maintain databases that can be used by the community to monitor health problems and health service performance.

3) Provide technical assistance to the community in health services research, planning, and program evaluation.

During the first year of the project, the coordinating staff of students and faculty at the University of Texas School of Public Health (UTSPH) were put on the grant;¹ a website,

¹ UTSPH Coordinating Staff: Project Director, Charles Begley; Project Coordinator, Margaux Krempetz; Data Coordinator, Munseok Seo; Research Faculty, Michael Swint, Luisa Franzini; Student Researchers, Frances Lee, Gul Nowshad.
letterhead and other administrative capacity were developed; monthly meetings were conducted with representatives of academic, medical, and public institutions to promote the agenda and seek guidance for project activities; working groups were formed in several research areas; activity was completed by research teams on three existing projects; and five new project proposals were developed. Specific accomplishments are summarized below

**Organized research teams to conduct projects**

As part of our first objective, we choose to organize the research teams into five areas: Behavioral Health, Emergency Medical Care/Trauma, Primary Care, Health Promotion, and Community Surveys. Each of these working groups is comprised of members with various research and healthcare backgrounds. Within each group, members are responsible for facilitating group activities, identifying and analyzing problems within the population, inventorying existing research and addressing unmet needs, identifying and facilitating the use of databases and funding streams and evaluating new initiatives. Each working group is to be headed by a chairperson.

To date, we have successfully established two fully operational working groups- the Behavioral Health Working Group and the Emergency Medical Care/Trauma Working Group. The seven members of the Behavioral Health Working Group represent collaboration between the UTSPH, the University of Texas Mental Sciences Institute, Mental Health Association of Greater Houston, Houston Independent School District Psychology Services, Mental Health & Mental Retardation Authority of Harris County, and the City of Houston Health Department. The Emergency Medical Care/Trauma Working Group has ten members from the UTSPH, Harris County Hospital District, Texas Childrens’ Hospital, Memorial Hermann Healthcare System, Baylor College of Medicine, University of Texas Medical School, and the Houston/Galveston Area Council.

**Completed activity on existing projects**

*Harris County Emergency Department Use Study – Charles Begley, Principle Investigator*

Gateway to Care and the Harris County Hospital District funded Dr. Begley and a UTSPH student affiliated with the Collaborative to obtain and analyze 2004 ED visit data from 16 hospitals in Houston, Texas. The New York University ED Algorithm was
applied to estimate the number of visits that were primary care-related. The characteristics and geographic origin of patients making primary care-related visits was analyzed. A report was prepared and shared with various planning groups in the community, and a paper was submitted and accepted for publication in a professional journal.

Houston/Galveston Area Trauma/EMS Policy Council Data Project – Charles Begley, Principle Investigator

The Trauma/EMS Policy Council, formed in 2004 to address the regional trauma care crisis in Houston/Harris County, has charged Dr. Begley and an UTSPH student affiliated with the Collaborative with developing measures to gauge the functioning of the local emergency/trauma system and the impact of policy changes. Dr. Begley and the UTSPH student have worked to obtain and analyze emergency room diversion data, trauma registry, and hospital discharge data in order to develop benchmark indicators of performance of the regional trauma system. A report was prepared for the Council and the UTSPH student is preparing a dissertation proposal using the data.

Using the 2004 Behavioral Risk Factor Surveillance System (BRFSS) to Estimate Access to Services by the Uninsured in Harris County – Heather Draper, Principle Investigator

This project assessed the usefulness of existing data from the statewide BRFSS survey in estimating health care coverage and other health care access indicators in Harris County. Subpopulation sample sizes were examined and local estimates calculated with appropriate weighting. Odds ratios were calculated to examine the relationship between access to preventive services and coverage with and without weighting. The UTSPH student affiliated with the Collaborative completed this project to meet her thesis requirement.

Developed new project proposals

Juvenile Offenders and Mental Health – Scott Hickey, Principle Investigator

The purpose of this project is to describe the extent of mental health involvement among juvenile offenders, with the goals of: 1) Understanding the system entry points taken en route to mental health treatment; 2) Documenting the mental health needs of juvenile offenders; 3) Describing the nature of juvenile offenses committed by adolescents with mental disorders; 4) Exploring the relationship of mental disorder to juvenile justice
Making Research Work to Improve Health

recidivism; and 5) Use this data as a pilot or demonstration study to serve as a basis for securing outside research funding.

Community Behavioral Health Program Evaluation – Charles Begley, Principle Investigator

This project is evaluating the outcomes of this recently implemented integrative care model to provide behavioral health services to underserved populations in Harris County. The evaluation will focus on the behavioral health resources that are available at each primary care site, the integrated care procedures that have been developed, the extent to which the procedures are being followed, and the characteristics of patients treated.

Ambulatory Care Sensitive (ACS) Hospitalization and Local Capacity for Primary Care Services in the Greater Houston Area – Michael Swint, Principle Investigator

The objective of this project is to investigate the association between ACS rates and the local capacity for primary care services. The Prevention Quality Indicators (PQIs) are measures defined by Agency for Healthcare Research and Quality (AHRQ) as measures to identify ACS conditions based on hospital inpatient discharge data. The PQIs in this project are used to identify unmet community needs and to compare performance of local health care systems across communities. By combining the results with the investigation of local primary care services capacity (SLEH Charities), hopefully we will be able to identify the highest need ACS conditions in the community and estimate whether local capacities will meet these primary care service needs.

Evaluating the Harris County Hospital District Ask Your Nurse” Hot Line – Dean Johnson, Principle Investigator

The purpose of this study is to determine if the Ask Your Nurse program at the LBJ Hospital has reduced emergency department (ED) visits by diverting Harris County Hospital District (HCHD) gold card holders with non-emergent complaints away from the ED to a primary care facility or home care. The results of this study will be used to argue for or against the continuation of this initiative as part of the solution to the ED overcrowding problem in Harris County.

Katrina Evacuee Community Health Study – Sondip Mathur, Principle Investigator

The objectives of this study are to utilize medical record data to 1) identify and assess the health status (prevailing acute and chronic conditions) and medical treatment of Katrina
Making Research Work to Improve Health

evacuees during their initial two-week period at the public shelters and six to eight months later in Houston community clinics; 2) assess through patient and provider surveys the sociodemographic and coverage characteristics of evacuees, and perceptions of access to and appropriateness of care, referral, and decision-making processes; and 3) examine the relationship between sociodemographic, coverage, and health care safety net factors and continuity of care. A team was formed in the fall of 2005 and a proposal was prepared and submitted to Texas Southern University (TSU) for funding. The proposal was funded by TSU in January 2006 and the team is beginning to carry out the study.

Obtained databases and assisted in their use

Since the formation of the Collaborative, the Texas Health Care Information Collection (THCIC) hospital discharge data, the Behavioral Risk Factor Surveillance System (BRFSS) population survey data, and the diversion report data of Harris County hospitals have been obtained, updated, and prepared for use by researchers. In addition, the Texas Trauma Registry data has been requested from the Texas Department of State Health Services. In order to meet researchers’ needs, we have identified important research variables, modified variables appropriately to meet researchers’ purpose, and assisted researchers in the use of the datasets.

Provided technical assistance

In keeping with our third objective to provide technical assistance to the community, we have created a website (http://www.sph.uth.tmc.edu/hsrc/) with information regarding the Collaborative, the working groups, our current research, information regarding various public databases and valuable resources for the community. In addition to the website, we have also created a logo and tagline (Making Research Work to Improve Health) and are currently working to produce a pamphlet. Our monthly meetings, during which various projects are presented by members of the working groups, provide an opportunity for our researchers to receive feedback from other Collaborative members. Additionally, we are currently providing assistance to St. Luke’s Episcopal Health Charities, Project Safety Net regarding their primary health care survey.

II. UNEXPECTED OUTCOMES OR DIFFICULTIES

We have found that, despite our best efforts and the enthusiasm of many community health leaders and researchers, establishment of the working groups has taken a great deal more time than originally anticipated. While many community leaders have demonstrated genuine interest in participating in the Collaborative, we have come to realize that their
knowledge and background serve best in an advisory role, rather than as working group chairs. For these positions, it seems that local researchers are better equipped to facilitate new research and seek grants.

Because it has taken us longer than expected to formalize our working groups, we chose to postpone our conference until we have solidified the groups and taken on a few more research projects. In the meantime, we participated in the August 2005 Public Health Data Sharing Conference hosted by the Houston Department of Health and Human Services. Our presentation was part of the “Successful Data Sharing” session and focused on the main objectives of the Collaborative and our ED Algorithm project as an example.

III. PROJECT BENEFITS

Research support for local planning groups

Harris County Public Healthcare System Council – Dr. Begley is on the Clinics Committee and serves as an alternate on the Council for the Dean of the UTSPH. He has made several presentations to the Council based on the Hospital Emergency Department Use Study.

HGAC Trauma/EMS Policy Council – Dr. Begley and Munseok Seo serve on the Data Committee and have made reports to the Council on indicators of regional performance of the trauma system using the datasets that have been obtained.

Gateway to Care – Dr. Begley serves on the board of Gateway and has made several reports based on the Hospital Emergency Department Use Study.

The Behavioral Healthcare Committee of the Harris County Public Healthcare System Council, the Mental Health Needs Council, and the Behavioral Healthcare Providers Network – Several members of the Collaborative working group on behavioral health participate in these planning groups and have made reports to the groups based on their Collaborative-related projects.

Evaluations of new initiatives

Community Behavioral Health Program – Collaborative researchers are conducting the evaluation of this project to determine if co-locating behavioral health specialists in primary care settings is an effective way to expand specialty care in the safety net system.
Ask Your Nurse – This evaluation being conducted by the Collaborative will determine if telephone consultations with nurses can reduce the rate of primary care-related emergency room visits among Harris County Hospital District enrollees.

Juvenile Offenders Program – Collaborative researchers are conducting this evaluation to determine if it is cost-effective to provide community-based mental health services to offenders.

**Publications**

Houston Hospitals Emergency Department Use Study: January 1, 2004 through December 31, 2004, Final Report. School of Public Health, University of Texas Health Science Center at Houston, Charles Begley, Manish Aggarwal, Keith Burau, Hyvan Dang, *January 2006*

Begley et al., Emergency room use and access to primary care: evidence from Houston, Texas, Accepted for publication in the Journal of Health Care for the Poor and Underserved.

Begley et al., Data Committee Report, Trauma/EMS Policy Council, January 26, 2006.

**IV. BREAKDOWN OF GRANT EXPENDITURES:**

Budget: $157,000.00  
Expenses: $99,948.48  
Encumbrance: $636.93  
Balance: $57,688.45

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Approximately one third of the first year grant was not used for three primary reasons. First, it took several months to put all the UTSPH staff on the grant. Second, one student
research position has not been filled, but will as soon as another working group becomes active. Third, we did not host a research conference for the reasons stated above. We expect to spend the carryover funds in the second year of the project as we continue to expand our activities and become fully operational.

Submitted by:

Name: __________________________ Title: ________________________________

Date: __________________________