EMERGENCY MEDICINE PROGRAM IN IMPLEMENTATION RESEARCH AND ECONOMICS (EMPIRE)

CHARTER
2018 (v1)
The EMPIRE faculty will provide guidance, technical assistance, networking, and capacity building for research, program development, and quality improvement projects seeking to translate evidence-informed practices into emergency medical care, including programs focused on care transitions; system-based, trans-setting approaches; and healthcare finance and economics.
The EMPIRE will improve the methodologic rigor of implementation projects through consultation with experienced methodologists, while maximizing the likelihood of implementation success and sustainability through consultation with experienced emergency medicine clinicians and operational leaders.
GOVERNANCE

- Steering Committee
  - Oversees the review, guidance, and technical assistance provided by EMPIRE faculty to projects

- Faculty
  - Individuals who provide review, guidance, education, and seek funding in their domains of expertise

- Members
  - Investigators and individuals who are associated with EMPIRE, either as subject matter experts, project team leads, or technical advisors
GOVERNANCE

- Clinical Core
  - Martin Reznek, MD, Director
  - Subject matter and operational experts in clinical emergency medicine
- Methods Core
  - Edwin D. Boudreaux, PhD, Director
  - Research and evaluation design experts
  - Implementation scientists
- Health informatics core
  - Connie Nichols, MD, Director
  - Health informatics and EHR expertise
SERVICES PROVIDED

- Review emergency medicine projects aimed at translating evidence-informed procedures into clinical care
- Provide guidance on research and evaluation methods options
- Provide guidance on data ascertainment and analyses
- Provide clinical and operations guidance to ensure goodness of fit and maximize likelihood of implementation success
SERVICES PROVIDED

- Provide templates and boilerplate language for grant applications, project development, implementation strategies, methodological considerations, IRB applications, and CV language
- Provide pre-IRB review and guidance on IRB submission
- Provide guidance on funding of preliminary studies used to attract larger extramural funding
SERVICES PROVIDED

- Provide guidance and connection with subject matter experts knowledgeable about healthcare finance and economics
- Liaison with Patient and Family Advisory Committees
- Liaison with other UMMHC and UMMS partners, including IT/IS, quantitative and methods resources, and operations leadership in other departments and settings
SERVICE LEVELS

- Sponsored
  - Full faculty involved
  - Faculty assigned to team
- Consultation
  - No faculty assigned to team
  - Multiple or single
  - Entire faculty or subset
- Networking/Team building
  - Finds clinical or method partner as needed
SPONSORED PROJECT

Kick-off
- Full faculty
- Brainstorm
- Assign faculty team member(s)

Protocol Review
- Full faculty
- Review draft protocol

Implementation
- Focused faculty
- Review implementation strategy

Director Review
- Final strategy reviewed by Directors

Post-implementation
- Focused faculty
- Review as needed
MEETING SCHEDULE

- Quarterly
  - Informal project review
  - Sponsored project progress report
  - Bite size learning on methodology or clinical topics
- Project specific
  - As needed
Identify Best Practice

- Clinician or Researcher
- Evidence Based EM, Clinical Practice Guideline, Standard of Care, Quality Indicator
- Within EM, translation from another specialty
- Resulting from known problems/challenges
- Clear impact on patient outcomes, clinical/system improvements, costs
Implementation Cycle

Identify Best Practice

Steering Committee
Review, Prioritize

- Submit to Steering Committee
- Template with supporting documentation
- Refine idea
- Review and prioritize
Identify Best Practice

Steering Committee Review, Prioritize

Build Project Team

Clinician
Methodologist
Health Informaticist
Frontline rep
Leadership rep
Other specialties
Budget person
Implementation Cycle

Identify Best Practice

Steering Committee Review, Prioritize

Build Project Team

Implementation Strategy

- CQI (Lean)
- A3
- PDSA(s)
- Training/Education
- Timeline
- Budget
- Resources
- Roles and responsibilities
Evaluation Design, Metrics
- Evaluation/Research design
- Identify metrics/data, ascertainment
- Metric/Data analysis plan

Identify Best Practice

Steering Committee Review, Prioritize

Build Project Team

Implementation Strategy
Implement

→ PDSA the change
→ Goal directed milestones
→ Present progress, summaries to appropriate groups (VC, faculty)
Implementation Cycle

1. **Steering Committee Review, Prioritize**
2. **Build Project Team**
3. **Implementation Strategy**
4. **Evaluation Design, Metrics**
5. **Implement**
6. **Sustain**
   - Identify metrics, review time points
   - Engage sustainability plan
   - Provide evaluation summary

**Flow of the Implementation Cycle:**
- Identify Best Practice
- Steering Committee Review, Prioritize
- Build Project Team
- Implementation Strategy
- Evaluation Design, Metrics
- Implement
- Sustain
EMPIRE will support:

- Ideas with strong potential for improving clinical outcomes
- Generation of preliminary data
- Identify, attract funding
- Identify resources
- Provide training, experience, guidance

- Implement strategy
- Evaluation design, metrics
- Implements team
- Sustain