Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R01, R21)

Healthcare Delivery Research Program

Division of Cancer Control and Population Sciences



Webinar presenters

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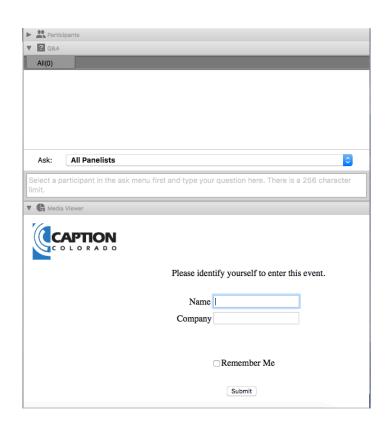
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Using WebEx and webinar logistics



- Submit questions at any time during the presentation. Type into the Q&A feature on the right of the interface and press "submit"
 - Closed captioning is available by selecting the Media Viewer Panel on the right hand side of your screen
- This webinar is being recorded

Outline

- Background
- FOA Details
- Questions
 - Questions about specific aims or grant application details will not be addressed

Background

Healthcare Delivery Research Program

NCI DCCPS organizational structure

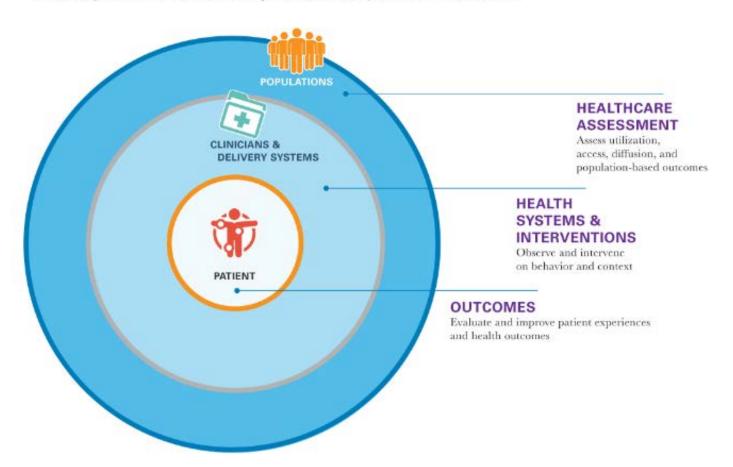
Division of Cancer Control and Population Sciences (DCCPS)

Healthcare Delivery Research Program (HDRP) Behavioral Research Program (BRP) Epidemiology and Genomics Research Program (EGRP) Surveillance Research Program (SRP)

https://healthcaredelivery.cancer.gov

HEALTHCARE DELIVERY RESEARCH PROGRAM

Advancing innovative research to improve the delivery of cancer-related care



How we fund grants

- Although most of our portfolio consists of investigator-initiated (unsolicited) grants, HDRP also supports grant applications in specific areas of interest
 - Requests for Applications (RFA)
 - Identifies the specific receipt date(s), the estimated amount of funds earmarked for the
 initiative, the number of awards likely to be funded, and any specific criteria for scientific peer
 review; applications received in response to a particular RFA are reviewed by an Institute's
 Scientific Review Group
 - Program Announcements (PA)
 - Most PA applications are submitted with a standing receipt date and are reviewed with all other applications received at that time using standard peer-review processes
 - Program Announcement (PAR)
 - Program announcements with special receipt, referral, and/or review considerations

Grant mechanisms – R01 and R21

NIH Research Project Grant (R01)	NIH Exploratory/Developmental Grant (R21)
 Support a discrete, specified, and circumscribed research project 	 Supports new, exploratory, and developmental research projects
 Most commonly used grant program No specific dollar limit Advance permission required for ≥\$500K direct costs in any year 3-5 years funding 	 Sometimes used for pilot and feasibility studies Preliminary studies are discouraged Combined budget for direct costs for the two-year project period usually may not exceed \$275,000 Up to 2 years funding

Background

Informal Cancer Caregiving

Informal Caregivers

- Individuals that assist family members/friends by providing care which is:
 - typically uncompensated
 - usually in the home setting
 - involving significant efforts for extended time
- Caregiving can require demanding tasks, including:
 - Monitoring for side effects
 - Managing symptom burden
 - Treatment decisionmaking
 - Care coordination

- Triage
- Administering medication
- Technical medical tasks
- Managing patient's financial and social obligations





Cancer-specific caregiving

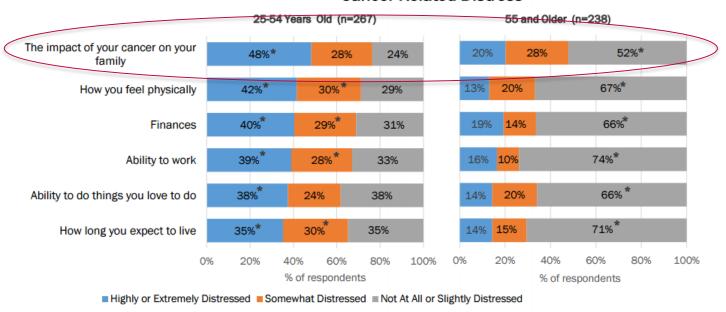
- Unique aspects of caregiving in the context of cancer
 - Rapid deterioration of health
 - High burden of care
 - Multi-modal therapies
 - Cancer care continuum
 - Recurrence, and fear of recurrence



For the vast majority of respondents, being diagnosed with cancer caused distress. The impact of cancer on their family was most often reported as being extremely stressful. In all aspects of life mentioned in this survey, respondents aged 25 to 54 years were significantly more likely than those aged 55 years and older to report being highly or extremely distressed.



Cancer-Related Distress



^{*}Indicates statistically greater at 90% confidence level

^{11.} How distressed (anxious, extremely upset, or in emotional pain, for example) have you been due to the impact cancer has had on the following aspects of your life?

Cancer-specific caregiving



National Alliance for Caregiving National Cancer Institute Cancer Support Community

Hunt, G. G., Longacre, M. L., Kent, E. E., Weber-Raley, L. (2016) Cancer Caregiving in the U.S.: an Intense, Episodic, and Challenging Care Experience. National Alliance for Caregiving

Main findings:

- ~2.8 million adults serving as a caregiver to an adult with cancer in the U.S.
- Average time per week caring: 32.9 hours
- 43% performing complex medical/nursing tasks without any prior preparation
- 50% reporting high emotional stress
- 25% reporting high levels of financial strain

http://www.caregiving.org/cancer/

Caring for Caregivers and Patients: Revisiting the Research and Clinical Priorities for Informal Cancer Caregiving

Sponsored by the National Cancer Institute and the National Institute for Nursing Research

May 4-5, 2015 NCI Shady Grove TE406

NCI Planning Committee: Co-chairs Erin Kent (NCI), Julia Rowland (NCI)
Wen-Ying Sylvia Chou (NCI/DCCPS/BRP), Kristin Litzelman (NCI/DCCPS/BRP),
Ann O'Mara (NCI/DCP), Nonniekaye Shelbume (NCI/DCCPS/EGRP)

Caring for Caregivers and Patients: Research and Clinical Priorities for Informal Cancer Caregiving

Erin E. Kent, PhD, MS¹; Julia H. Rowland, PhD¹; Laurel Northouse, PhD, RN²; Kristin Litzelman, PhD¹; Wen-Ying Sylvia Chou, PhD, MPH¹; Nonniekaye Shelburne, MS, CRNP, AOCN¹; Catherine Timura, PhD, MPhil³; Ann O'Mara, PhD, RN, MPH⁴; and Karen Huss, PhD, RN⁵

Kent et al., 2016, Cancer, PMID: 26991807

Key Recommendations

Expanding
Assessment
of
Prevalence
and Burden

Improving Interventions

Maximizing the Positive Impact of Technology

Integrating caregivers into the healthcare system

Selected Recommendations

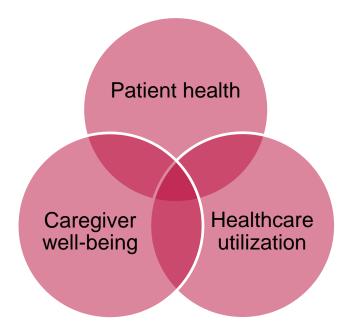


- Prioritize health outcomes of interest, define constructs, and harmonize measures
- Examine effects of interventions on patient and caregiver outcomes, health care utilization, and costeffectiveness.
- Increase the inclusion of diverse populations
- Replicate interventions that show some benefit and attend to fidelity and dose

Intervening with cancer caregivers to improve patient & caregiver health outcomes and optimize healthcare utilization: PAR-16-317 (R01), PAR-16-318 (R21)

- Fund interventions that support the success of informal cancer caregivers for adult cancer patients, as measured by the following outcomes:
 - 1. Improved patient health
 - 2. Improved caregiver well-being
 - 3. Optimized healthcare utilization

https://grants.nih.gov/grants/guide/pa-files/PAR-16-317.html https://grants.nih.gov/grants/guide/pa-files/PAR-16-318.html



FOA Details

Informal Cancer Caregiving

Application requirements

- Study design must consist of a behavioral or healthcare delivery intervention with random assignment and a control group
- R21s need not consist of a double-arm RCT; applications submitted as R21s can propose to develop and test acceptability and feasibility
- Interventions must be delivered at least to the caregiver, though can also be delivered to the patient/care recipient
- Patients must be at point of diagnosis forward on the cancer control continuum. Studies conducted with patients in active treatment, transitioning into survivorship, with advanced cancer, or at end-of-life are acceptable
- Only studies conducted with patients ages 21 and over at diagnosis are eligible

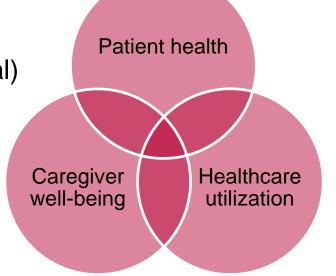
Application requirements

Outcomes:

 At least one cancer patient-level health outcome (behavioral, physical, and/or psychosocial morbidity)

 At least one caregiver-level outcome (behavioral, psychosocial, and/or physical)

 At least one healthcare utilization/ health system-level outcome related to care delivery, program implementation, and/or sustainability



Application requirements

- Adjunct mixed-methods and/or qualitative studies to determine the most effective components of interventions are encouraged in the context of the above study designs
- Development and testing of assessment instruments to evaluate cancer caregiving
- Special consideration will be given to applications that target underrepresented and/or medically underserved populations.

Research strategy

- Describe the proposed project using the standard sub-sections (Significance, Innovation, and Approach).
- The description must address all the specific aspects listed below.
 - A clear definition of the target cancer patient/caregiver population, as well as indication of how the project addresses persistent and salient problems for the specified population
 - Inclusion of a research team with appropriate caregiving science and health services expertise
 - A description of how the intervention will balance improvements targeted in all 3 outcome areas: (1) healthcare utilization; (2) caregiver well-being; and (3) patient health
 - A strategy for how the intervention, if successful, will be appropriately disseminated.

Specific review criteria

Significance:

Does the project address persistent and salient challenges that the targeted cancer patient/caregiver population faces? How amenable is the proposed intervention for dissemination/implementation?

Investigator:

 Does the research team include appropriate caregiving and health services expertise (broadly construed)?

Approach:

Does the intervention appropriately balance improvements targeted in all three outcome areas: (1) health care utilization; (2) caregiver well-being; and (3) patient health?

Read the FOAs very carefully!

- PAR-16-317 (R21); PAR-16-318 (R01)
- Application Due Dates:
 - October 10, 2017; April 11, 2018; October 10, 2018; April 11, 2019
 - Note the special review submission dates and that there are only 2 submission dates per year, including resubmissions (A1s)
- Letter of Intent: Not required, but encouraged, one month prior
- Start the process early! Allow time for registration in the System for Award Management, eRA Commons, and Grants.gov

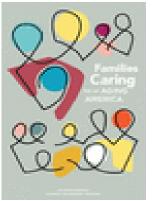
Resources

- Today's webinar and FAQ will be posted on our website: https://healthcaredelivery.cancer.gov/media
- Connect with your Program Directors early!
- Check the FOA for contact information

Additional resources



The National Academies of SCIENCES • ENGINEERING • MEDICINE



National Academies of Medicine Study of Caregiving for Older Adults (September, 2016)

https://healthcaredelivery.cancer.gov/caregiving/



National Institute of Nursing Research Meeting (August, 2016)

https://videocast.nih.gov/



Summary:

- Intervening with cancer caregivers to improve patient & caregiver health outcomes and optimize healthcare utilization
- PAR-16-317 (R01): https://grants.nih.gov/grants/guide/pa-files/PAR-16-317.html
- PAR-16-318 (R21): https://grants.nih.gov/grants/guide/pa-files/PAR-16-318.html
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Questions?

Please type your questions in the Q & A section on WebEx

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