

Response Form for the Final Performance Review Report*

1. Name of Grantee: UPMC McKeesport
2. Year of Grant: 2010 Formula Grant

A. For the overall grant, briefly describe your grant oversight process. How will you ensure that future health research grants and projects are completed and required reports (Annual Reports, Final Progress Reports, Audit Reports, etc.) are submitted to the Department in accordance with Grant Agreements? If any of the research projects contained in the grant received an “unfavorable” rating, please describe how you will ensure the Principal Investigator is more closely monitored (or not funded) when conducting future formula funded health research.

UPMC utilizes a centrally managed grant administration department, Office of Sponsored Programs and Research Support (OSPARS), which is responsible for the financial oversight of all grant and contract activity at UPMC. OSPARS works to ensure compliance with federal/state regulations as well as adherence to UPMC policy.

* Please note that for grants ending on or after July 1, 2007, grantees' Final Performance Review Reports, Response Forms, and Final Progress Reports ***will be made publicly available on the CURE Program's Web site.***

Project Number: 1087601
Project Title: Outcomes of Disparate vs. Non-Disparate Cancer Patients
Undergoing Patient Navigation
Investigator: Heron, Dwight

B. Briefly describe your plans to address each specific weakness and recommendation in Section B of the Final Performance Summary Report using the following format. As you prepare your response please be aware that the Final Performance Review Summary Report, this Response Form, and the Final Progress Report will be made publicly available on the CURE Program's Web site.

Reviewer Comment on Specific Weakness and Recommendation (*Copy and paste from the report the reviewers' comments listed under Section B - Specific Weaknesses and Recommendations*):

Response (*Describe your plan to address each specific weakness and recommendation to ensure the feedback provided is utilized to improve ongoing or future research efforts*):

Reviewer 1:

1. The investigators should provide validated definitions for good outcome, provide sample size calculation/justification, provide better description of the data analysis plan and perform case-mix adjustment. This will improve the validity of their study findings.

Response:

The initial scope of the project referenced the data set that was to be used in measuring disparate outcomes for low income cancer patients. The data was retained from an earlier study on the effectiveness of a patient navigator.

2. The investigators should provide information on the explanatory variables that were collected as part of the study and provide more information on strategies to improve the disparate outcomes they found in the study clinics. Given the amount of time they spent working with these clinics, they should be able to provide some information on how to make improvement in outcomes.

Response:

We agree that there could have been additional insight/analysis done to provide additional information on how to improve outcomes.

3. The major benefit of the study is that it provides insight into how outcomes in the identified clinics compare to the national average and provides areas for future improvement. However, the investigators did not collect key patient, provider and clinic/systems predictors of poor outcomes that would help guide future interventions. It is important to collect these types of data and the investigators are encouraged to explore reasons for the observed disparities in outcomes.

Response:

I refer again to the initial scope of the study, which was to study the differences in outcomes between the two groups of cancer patients.

Reviewer 2:

1. The statistical analyses for the project should have been more sophisticated. In addition to crude frequencies, regression models adjusting for all/many of the key factors could have been done. Also potential contributors to the disparities such as clinical care, adherence, etc. could have been explored.

Response:

This is a very similar response as that from reviewer #1. We agree that additional regression analyses would have provided additional insight. However, the scope of the project did not include other potential contributors to outcomes outside of socio-economic factors.

Reviewer 3:

1. The descriptive statistics and proportions presented were excellent; however, the biostatistician could have also included some tests of statistical significance, for example, to test the difference in success rates by gender, race, etc. These would have been simple 2 x 2 chi-squared tests. It would also have been interesting to include an analysis of all patients, including those who died because of other causes. It is sometimes difficult to attribute cause of death, and an additional analysis may have been informative.

Response:

We agree that there could have been additional insight/analysis done to provide additional information on how to improve outcomes.

2. It would have been interesting to compare the three hospital sites' successes to those of the Commonwealth rather than to rates via the National Cancer Institute, since it is known that the risks factors for low survival are greater in Pennsylvania when compared to national averages. The average period of follow-up of patients should also have been included in the analyses.

Response:

Additional comparison to commonwealth averages, in addition to national averages would have provided a more robust insight into the disparities in Pennsylvania.

C. If the research project received an “unfavorable” rating, please indicate the steps that you intend to take to address the criteria that the project failed to meet and to modify research project oversight so that future projects will not receive “unfavorable” ratings.

Response:

D. Additional comments in response to the Final Performance Review Report (OPTIONAL):

Response: