



From the Director's Desk

At the 2013 [Wisconsin Health Improvement and Research Partnerships Forum](#), Paul Smith received honor for his years of service as WREN Director. Paul built WREN into a sustainable organization with dedicated staff and proven abilities to organize and facilitate practice-based research. Paul's is a hard act to follow. As I complete my first year as WREN Director, I am contemplating the question: Where does WREN go from here?

My answer is two-fold. First, WREN will continue to build on Paul's accomplishments of linking academic researchers with practicing clinicians to conduct what [John Beasley](#) has referred to as, "big R" research. Second I would like to see WREN encourage an ongoing paradigm shift in clinical research and more directly involve our members. To explain what I mean, here are extracts from a recent [opinion piece](#)¹: "...clinical research has evolved as a specialized activity conducted in parallel to clinical practice...The mutual isolation of research and practice...raises concerns about whether studies performed in a separate research context can truly inform clinical practice...[Q]uality improvement programs often settle for suboptimal designs and methods to avoid being classified as research...The Institute of Medicine's concept of a 'learning health system' envisions virtuous cycles in which ... evidence-based practice...is complemented by...practice-based evidence...so that each health care encounter contributes incrementally to informing practice...Taken together, these advances – a commitment to knowledge development as part of practice, better and more accessible data, and an ethical framework based on risk rather than outmoded divisions between quality improvement and research – may allow many unanswered questions to be addressed and will increase patients' and clinicians' confidence in the choice of preventive measures, diagnostic tests, and therapies."

My challenge to myself – and to all WREN members – is to find ways to fulfill this vision. I welcome your comments and ideas as WREN updates its strategic plan throughout 2014.

¹ *Califf RM. Embedding...Research Into Practice. JAMA 2013; 310: 203702038*



WREN Research Coordinators at an influenza training

Real-Time Statewide Influenza Surveillance

Sixteen WREN clinics throughout Wisconsin are participating in an exciting project aimed to explore real-time influenza surveillance. Led by Dr. [Jonathan Temte](#), the project is a partnership between the [Wisconsin State Laboratory of Hygiene](#), the [Wisconsin Division of Public Health](#), UW School of Medicine of Public Health's [Department of Family Medicine](#), and WREN.

The project aims to assess a new approach to flu surveillance in primary care settings. Each of the 16 clinics will collect nasal swab specimens from patients with acute respiratory infections for influenza testing. The clinics will process the swabs using a rapid influenza detection analyzer, which tests for influenza A and B. Using this CLIA-waived analyzer, test results are available to the clinic in about 15-20 minutes. The analyzer is also attached to a wireless router so results are instantly sent to a public health agency. By using this wireless technology, the hope is to reduce the normal lag time seen in influenza reporting (it often takes 1-3 weeks for public health agencies to get flu results). This approach will allow public health agencies to see real-time results to track influenza outbreaks.

Participating clinics include:

- Aurora Sheboygan Clinic – Howards Grove (*Howards Grove*)
- Aurora St. Luke's Family Practice Center (*Milwaukee*)
- Aurora Sinai Family Care Center (*Milwaukee*)
- Affinity Medical Group – Greenville (*Greenville*)
- Best Care Pediatrics (*Milwaukee*)
- Bridge Community Health Center (*Wausau*)
- Ellsworth Medical Clinic (*Ellsworth*)
- Mayo Clinic Health System – Franciscan Healthcare in Tomah (*Tomah*)
- Milwaukee Health Services, Inc. – Isaac Cogg's Heritage Health Center (*Milwaukee*)
- Milwaukee Health Services, Inc. – MLK Heritage Health Center (*Milwaukee*)
- Mile Bluff Clinic (*Mauston*)
- NorthLakes Community Clinic (*Iron River*)
- Richland Medical Center (*Richland Center*)
- Scenic Bluffs Community Health Centers – Cashton (*Cashton*)

- Spring Valley Medical Clinic (*Spring Valley*)
- UW Health – Augusta Family Medicine Clinic (*Augusta*)

To learn more about this project, visit the [WREN website](#).



PI Profile – Tosha Wetterneck, MD, MS, FACP, SFHM

Many WREN members may recognize Dr. Tosha Wetterneck from participation in a study called SAFE-C (Situational Awareness to Facilitate Excellent Care). This ambitious study of a team-based, pre-visit planning intervention was carried out by dedicated staff in four primary care clinics throughout the state. In addition to the hard work of clinic staff, the completion of the randomized controlled trial was due in large part to the outstanding leadership of Dr. Tosha Wetterneck.

Originally a co-investigator, Wetterneck stepped up to the plate to become the Principal Investigator (PI) when her friend and colleague, Dr. Bentzi Karsh was diagnosed with cancer. The late Dr. Karsh, a professor in the Department of Industrial Engineering, was instrumental in forming research collaborations between primary care and industrial engineering. Dr. Wetterneck assumed the role of PI for SAFE-C, continuing the work that she and Dr. Karsh began years earlier. The WREN team is grateful for Dr. Wetterneck’s commitment to maintaining the integrity of the SAFE-C study and seeing it through to completion.

Dr. Wetterneck has an impressive array of professional, clinical and academic interests and credentials. She has performed patient safety research at the Center for Quality and Productivity Improvement (CQPI) since 2003. Inspired by her work with Industrial and Systems Engineering colleagues, she earned a Master’s degree in Population Health Sciences with an emphasis in quality of care and human factors from UW-Madison. She designed and implemented the Patient Safety curriculum for medical students at UW School of Medicine and Public Health (UWSMPH) to share this knowledge with others in the profession.

Dr. Wetterneck is currently an Associate Professor with the Department of Medicine at UWSMPH. She is also an Academic Hospitalist at UW Hospitals and Clinics, the immediate Past President of the Wisconsin Medical Society and a Wisconsin representative to the American Medical Association.

When not working, Dr. Wetterneck enjoys being a mom to her eight-month-old baby, Liana, seeing the world through her eyes, and growing her collection of all things Raggedy Ann & Andy.

INSTTEPP: Tools for Chronic Care Self Management Support

Four primary care clinics in Wisconsin will start the new year working on an innovative study that brings patients to the table as clinics evaluate and implement self-management support tools for chronic conditions. INSTTEPP (Implementing Networks Self-Management Tools Through Engaging Patients and Practices) is an [AHRQ](#) funded grant to study patient engagement and self-management support.

INSTTEPP will use a method called [Boot Camp Translation](#) (BCT) to promote and study the implementation of AHRQ's Self-Management Support (SMS) Toolkit. BCT is a two-month intervention which begins with a one-day retreat. Patients and clinicians come together to learn about patient self-management for chronic conditions and the AHRQ SMS Toolkit. Retreat participants then continue the conversation with their clinics over the two-month intervention period and implement selected elements of the Toolkit.

WREN is collaborating with Practice Based Research Networks (PBRNS) in Colorado, Oregon and Iowa to promote and study the use of the AHRQ SMS Toolkit across 16 primary care practices. This study will assess the impact of the SMS Toolkit on practice staff and patients engaged in chronic care management, and identify factors related to successful implementation.



Practices Honored at 3rd Annual Research Partnerships Forum

The [Wisconsin Health Improvement and Research Partnerships Forum](#), held September 12-13 at Union South on the University of Wisconsin campus, welcomed 127 attendees from a variety of disciplines. In keeping with the Forum theme, “Facilitating Partnership: Common Mission, Multiple Approaches,” those attendees represented 12 research networks (including three practice-based research networks [PBRNs]), 14 health systems and independent health centers, five academic institutions, and 10 other public health and community-based health organizations.

WREN’s Annual Meeting, open to all attendees, presented the perfect opportunity to celebrate its partnership with primary care and to recognize clinics’ contributions to practice-based research during 2012-2013. Certificates were awarded for work on two studies. [Building on WREN and Diabetes Leadership Initiative Experience: Implementing Chronic Kidney Disease Guidelines:](#)

- Group Health Cooperative – East (*Madison*)
- Richland Medical Center (*Richland Center*)
- UW Health Belleville (*Belleville*)
- UW Health Augusta (*Augusta*)
- UW Health Eau Claire (*Eau Claire*)
- UW Health Mt. Horeb (*Mount Horeb*)
- UW Health Sun Prairie (*Sun Prairie*)

Workflow Assessment for Health IT Toolkit:

- Best Care Pediatrics (*Milwaukee*)
- Bridge Community Health Clinic (*Wausau*)
- Ellsworth Medical Clinic (*Ellsworth*)
- Family Health Associates (*Chippewa Falls*)
- Randolph Community Clinic (*Randolph*)
- Riverview Family Clinic (*Nekoosa*)
- Scenic Bluffs Community Health Center (*Cashton*)
- Sunrise Family Care Clinic (*Chippewa Falls*)

Thank you to all of the WREN sites that provide ongoing “real-world” laboratories for high-quality translational research!

[Better, Safer Care Through Clear Communication](#)

WREN has partnered with the UW Schools of Nursing and Pharmacy, the [Aging and Disability Resource Center \(ADRC\) of Green County](#), and Monroe Clinic on an exciting new project led by PI Paul Smith, WREN Associate Director. The group received funding from the UW Institute for Clinical and Translation Research to conduct a one-year pilot project to develop and test a small-group educational program for caregivers of elders to improve communication with health care professionals.

WREN will be recruiting 8-10 caregivers of older adults in the Green County area for each of three workshops, for a total of 24-30 participants. Workshops are scheduled to begin in early 2014. Better, Safer Care Through Clear Communication (BeST) aims to improve self-efficacy of caregivers and reduce caregiver burden.