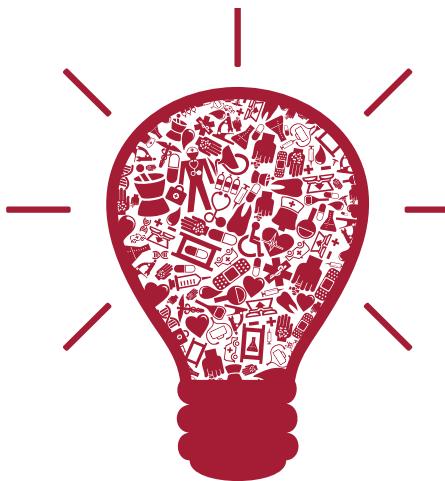


CERC PROGRESS REPORT, JANUARY – JULY 2017



BETTER HEALTH CARE WITH LESS HEALTH SPENDING

The Stanford Clinical Excellence Research Center (CERC) is discovering new care delivery methods to solve our nation's persisting crisis in the affordability of excellent care.

GIFT LAUNCHES CLINICAL TRIAL OF SPINE PAIN CARE INNOVATIONS

Thanks to a generous anonymous gift, CERC is conducting a randomized multi-site clinical trial evaluating novel approaches for the care of spine pain.

The Spine Pain Intervention to Enhance Care Quality and Reduce Expenditure (SPINE-CARE) trial seeks to rigorously evaluate two innovative methods of care for patients with spine pain: (1) a medically-based care innovation created by

a team of CERC fellows and faculty; and (2) a non-medically-based care innovation that has been provided to several hundred thousand patients in 19 U.S. cities. In collaboration with Harvard's Center for Healthcare Delivery Sciences at Brigham and Women's Hospital, CERC will compare each of these two treatment innovations with conventional medical care.

The trial launched in June via patient referrals from 15 Arizona clinics and is being locally managed by HonorHealth. We plan to add an additional city and attain a total trial enrollment of 3,000 patients, with 1,000 patients in each of the three treatment arms.



CERC EXPOSES THREAT TO WOMEN'S CAREERS FROM DEFECTS IN U.S. DEMENTIA CARE

CERC researchers investigating better, lower cost care for seniors suffering from dementia found that the burden on family members of providing care will disproportionately fall on working women. "The best long-term care insurance in our country is a conscientious daughter," CERC fellows and faculty wrote in a perspective article published in the May 8 issue of *JAMA Neurology*.

If nothing is done to improve U.S. dementia care and employer family leave policies, women's careers will suffer and employers will incur substantial costs from employee absenteeism, productivity loss, stress-related disability claims, and health benefits plan spending.



The findings were widely reported in the United States and Europe, including an article in the Science section of *The New York Times*. The *Times* noted that: "The essential role that daughters play in the American health-care system is well known but has received little attention. But some health-care analysts are beginning to sound the alarm about the challenges women face as caregivers—not just for children but for aging parents—often while holding full-time jobs."

2017-18 FELLOWS TACKLE LATE-LIFE CARE AND CARE FOR COMPLEX CHRONIC ILLNESS

The 2017-18 class of six CERC care design fellows includes diversely trained young physicians and behavioral scientists from the United States and Europe. Fellows will focus on two targets associated with more than 85 percent of U.S. health-care spending. One team will rethink late-life care; the other, care for complex chronic illness complicated by poverty and/or severe mental illness.

This coming year will be CERC's first opportunity to converge the fellows' care redesign targets with CERC's research on national "bright spots" in high-quality, low-cost care and with CERC's artificial intelligence research with the School of Engineering. It is also the first year in which all six of CERC's best fellowship applicants are women. It follows a fellowship class comprising one woman and five men.



**Myra Altman,
PhD**
Clinical Psychology



**Kendell Cannon,
MD**
Internal Medicine



**Chuan-Mei Lee,
MD, MS**
Psychiatry



**Danielle Rochlin,
MD**
Plastic and
Reconstructive
Surgery



**Francesca Salipur,
MD, PhD**
Surgery



**Claudia Schetuer,
MD**
Internal Medicine