

THE CENTER FOR HOME CARE POLICY & RESEARCH AT VNS HEALTH

**TABLE: 2026 ACTIVE PROJECTS**

(IN ALPHABETICAL ORDER BY NAME OF PROJECT) – AS OF 02/18/2026

Project Name		Funder	VNS Health Research Staff	Main Focus Area	Project Dates
1	<p>Development of a Screening Algorithm for Timely Identification of Patients with Mild Cognitive Impairment and Early Dementia in Homecare</p> <p>Description: This study seeks to develop a mild cognitive impairment (MCI) and early-stage dementia (ED) screening algorithm using linguistic and acoustic features extracted from patients' verbal communications and electronic health record data.</p>	National Institute on Aging (NIA); <i>Subcontract with Columbia University</i>	McDonald Spens Vergez	Quality & Outcomes	09/01/24-06/30/27
2	<p>Disparities in Infection in Home Health and Patients/Caregivers' Perceptions (Dis-Infection in HHC)</p> <p>Description: This multisite study is examining socio-economic disparities in infection events and will explore infection prevention and control related knowledge, attitudes, and practices among home healthcare patients and their caregivers. The final year of this study includes the pilot testing of an intervention to improve infection control practices.</p>	Agency for Healthcare Research and Quality (AHRQ); <i>subcontract with Columbia University</i>	McDonald Russell Barrón-Vayá Sridharan Onorato Vergez Kapela Vasquez Flaherty	Quality & Outcomes	09/03/21-08/31/26
3	<p>ENGAGE-D: DEsigNing Care ManaGement for Hospice TrAnsitions for Persons LivinG with AdvancEd Dementia</p> <p>Description: The aim of this study is to design and pilot a care management intervention to improve hospice transitions for diverse persons living with advanced dementia.</p>	National Institute on Aging (NIA); <i>subcontract with New York University</i>	McDonald Onorato	Quality & Outcomes	08/01/24-07/31/28
4	<p>Enhancing Palliative Care Integration in Home Healthcare: Assessing Readiness, Identifying Needs, and Overcoming Challenges (EPIC-HHC)</p> <p>Description: We will develop role-specific training and implementation strategies to improve palliative care integration in home health care by incorporating: (1) a brief admission screener using routinely collected information to identify patients who may benefit from palliative care; (2) a shortened, scalable readiness survey to assess clinicians' and patients'/caregivers' readiness at scale; and (3) stakeholder input to tailor implementation supports that promote adoption, fidelity, and sustainability.</p>	National Institute on Aging (NIA); <i>Subcontract with Columbia University</i>	McDonald	Quality & Outcomes	02/15/26-01/31/30
5	<p>Health-Related Quality of Life and Psychosocial Wellbeing for Individuals Managing Chronic Conditions after a Major Surgery</p>	National Institute of Nursing Research	Ryvicker Cheruvillil	Supporting Communities	07/01/21-04/30/26

	<p>Description: This mixed-method, longitudinal cohort study examines the psychosocial adjustment and health-related quality of life of individuals with one or more chronic health conditions admitted to home healthcare after genital reconstructive or other major surgery, informing future home- and community-based healthcare interventions to promote their health and wellbeing.</p>	<p>(NINR): <i>collaborating with University of Pennsylvania &amp; Columbia University</i></p>			
6	<p>I-TRANSFER-HF: Improving TRansitions ANd OutcomeS for Heart FailurE Patients in Home Health Care: A Type 1 Hybrid Effectiveness/Implementation Trial Description: This study will test an intervention called Improving TRansitions ANd OutcomeS for Heart FailurE Patients in Home Health CaRe (I-TRANSFER-HF), comprised of a first HHC nursing visit on the day of or day after hospital discharge with a total of three or more nursing visits the first week, <u>and</u> an outpatient visit within 7 days of discharge. The real-world effectiveness of this intervention for reducing 30-day readmissions in a national, pragmatic, multi-center, Type 1 Hybrid stepped wedge cluster randomized trial in partnership with 4 geographically diverse dyads of hospitals and HHC agencies ("hospital-agency dyad") compared to usual care will be examined.</p>	<p>National Heart, Lung Blood Institute (NHLBI); <i>subcontract with Weill Cornell Medicine</i></p>	<p>Bowles McDonald Ryvicker Barrón-Vayá Sridharan</p>	<p>Quality &amp; Outcomes</p>	<p>09/01/23-08/30/28</p>
7	<p>Improving Care Transitions and Self-care among Informal Caregivers of Hospitalized Older Adults through Digital Tools Description: The primary aim of this study is to compare the efficacy of the Virtual Caregiver Coach for You (ViCCY) intervention compared to digital health information alone in improving self-care of caregivers of hospitalized community-dwelling older adults with multiple chronic conditions who transition from hospital to home.</p>	<p>National Institute on Aging (NIA); <i>subcontract with University of Pennsylvania</i></p>	<p>Riegel</p>	<p>Quality &amp; Outcomes</p>	<p>09/01/23-05/31/28</p>
8	<p>Improving Self-Care of Caregivers of Adults in Homecare with Heart Failure and Cognitive Impairment Description: Previously, we developed and tested a virtual health coaching intervention to improve caregiver self-care. The intervention was effective in a sample of heart failure caregivers. In this new study, we will expand testing to a broader, more challenging population of underserved caregivers caring for patients with heart failure and cognitive impairment. If it works in these caregivers, this will be further evidence that the intervention may be able to address a need for support for millions of caregivers worldwide.</p>	<p>National Institute on Aging</p>	<p>Riegel Onorato McDonald Bowles Burgdorf Barrón-Vayá</p>	<p>Quality &amp; Outcomes</p>	<p>09/15/25-08/31/30</p>
9	<p>Improving TRAnSitions anD outcomeS oF sEpsis suRvivors (I-TRANSFER) Description:</p>	<p>National Institute of Nursing Research (NINR);</p>	<p>Bowles Barrón-Vayá Ryvicker</p>	<p>Workforce Training/ Quality &amp; Outcomes</p>	<p>12/01/20-11/30/26</p>

	The purpose of this study is to advance the science of transitional care for sepsis survivors, the study will test the effectiveness of the I-TRANSFER home health care early visit protocol intervention in the real world and study its implementation with a pragmatic, multi-center, Type 1 hybrid, stepped wedge randomized trial in partnership with five dyads of acute care and HHC providers (ten clinical sites in total).	<i>subcontract with University of Pennsylvania</i>			
10	Investigating Changes in Home Health Access and Quality for Medicare Beneficiaries with Alzheimer's Disease and Related Dementias Following Recent Payment System Revisions Description: The goal of the proposed research is to assess PDGM's impact on community entry to home health access, care delivery, and outcomes for community-living older adults with ADRD.	National Institute on Aging (NIA)	Burgdorf Barrón-Vayá	Quality & Outcomes	09/01/23-08/31/26
11	NurseAssist-AI: Leveraging AI to Minimize Documentation and Maximize Decision Support in Home Healthcare Description: The purpose of this study is to develop and test the feasibility of an innovative solution to improve documentation efficiency, reduce administrative burdens, and support decision-making to enhance the quality and consistency of care delivery by capitalizing on video recorded home health care clinician (HHC)-patient interactions.	American Nurses Foundation (AMF); <i>subcontract with Columbia University School of Nursing</i>	Topaz McDonald Vergez Vasquez Kapela	Quality & Outcomes	06/01/25-05/31/27
12	Optimizing Clinical Documentation Quality to Reduce Health Disparities in Home Healthcare: the ENGAGE Study Description: Stigmatizing language in the clinical notes negatively affects the quality of patient care and the attitudes of clinicians who view the notes. This project aims to design and pilot-test a technology-driven system, ENGAGE, that will help to identify and reduce the use of stigmatizing language among home healthcare nurses. Achieving this goal will health disparities and improve the quality of care for patients treated in home healthcare settings.	National Institute on Minority Health and Health Disparities (NIMHD); <i>subcontract with Columbia University School of Nursing</i>	Topaz McDonald Sridharan Gross	Quality & Outcomes	12/01/23-11/30/28
13	Supporting Dementia Caregivers During Medicare Home Health: Developing the DECLARE Needs Assessment Intervention Description: Family caregivers often act as an extension of the care team during home health care for older adults, yet their capacity and needs are not systematically assessed which limits their access to necessary support. This proposal would develop, refine, and pilot test a self-assessment intervention for the home health setting to improve communication and support between the	National Institute on Aging (NIA)	Burgdorf McDonald Kapela Flaherty Vasquez	Quality & Outcomes	06/01/23-02/29/28

	care team and family caregivers to patients with Alzheimer's Disease and Related Dementias. Proposed research and training activities would support the career development of Dr. Julia Burgdorf, whose career goal is to improve home- and community-based care for older adults by developing pragmatic clinical interventions to advance provider-led engagement and support of family caregivers.				
14	<p>Using automated speech processing to improve identification of risk for hospitalizations and emergency department visits in home healthcare</p> <p>Description: The goal of this study is to refine and finalize an automated speech processing system that uses patient-nurse audio recorded communication to improve identification of risk for hospitalizations and emergency department (ED) visits. We will audio-record regular nurse visits, extract and examine features that may serve as indicators of risk and develop a prediction risk model. In future work, this risk model can be integrated into home healthcare workflow to trigger timely and personalized alerts about concerning patient risk.</p>	National Institute on Aging (NIA); <i>subcontract with Columbia University School of Nursing</i>	Topaz McDonald Onorato Vergez Sridharan Flaherty	Quality & Outcomes	06/15/23-02/29/28
15	<p>VNS Health Veterans Outreach Project</p> <p>Description: The Research Center's role in this project is to provide data collection support and conduct an evaluation of the Veteran Liaison Program, which strives to expand healthcare access to veterans and their families; assist veterans in accessing benefits and community resources to ensure they are receiving the care and services to which they are entitled; help bridge the transition into the community from in-patient facility settings; and provide educational sessions for nurses, social workers, and home health aides to sensitize them to the special needs of veteran patients.</p>	Mother Cabrini Health Foundation	Stern	Supporting Communities	01/01/20-12/31/26