Roman A Ayele

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/4755932/publications.pdf

Version: 2024-02-01

623734 552781 32 752 14 26 citations g-index h-index papers 33 33 33 894 docs citations times ranked citing authors all docs

#	Article	IF	CITATIONS
1	Optimizing care coordination to address social determinants of health needs for dual-use veterans. BMC Health Services Research, 2022, 22, 59.	2.2	5
2	Differences in transitional care processes among high-performing and low-performing hospital-SNF pairs: a rapid ethnographic approach. BMJ Quality and Safety, 2021, 30, 648-657.	3.7	7
3	VA Care Coordination Program Increased Primary Care Visits and Improved Transitional Care for Veterans Post Non-VA Hospital Discharge. American Journal of Medical Quality, 2021, 36, 221-228.	0.5	3
4	Barriers to and Facilitators of Multimodal Chronic Pain Care for Veterans: A National Qualitative Study. Pain Medicine, 2021, 22, 1167-1173.	1.9	5
5	Gaps in Hospital and Skilled Nursing Facility Responsibilities During Transitions of Care: a Comparison of Hospital and SNF Clinicians' Perspectives. Journal of General Internal Medicine, 2021, 36, 2251-2258.	2.6	7
6	Lessons from the COVID-19 pandemic for improving outpatient neuropalliative care: A qualitative study of patient and caregiver perspectives. Palliative Medicine, 2021, 35, 1258-1266.	3.1	34
7	How Context Influences Hospital Readmissions from Skilled Nursing Facilities: A Rapid Ethnographic Study. Journal of the American Medical Directors Association, 2021, 22, 1248-1254.e3.	2.5	4
8	Experience of Community Neurologists Providing Care for Patients With Neurodegenerative Illness During the COVID-19 Pandemic. Neurology, 2021, 97, e988-e995.	1.1	3
9	Variability in skilled nursing facility screening and admission processes: Implications for value-based purchasing. Health Care Management Review, 2020, 45, 353-363.	1.4	10
10	Optimizing future planning in Parkinson disease: suggestions for a comprehensive roadmap from patients and care partners. Annals of Palliative Medicine, 2020, 9, S63-S74.	1.2	27
11	Cognitive Biases Influence Decision-Making Regarding Postacute Care in a Skilled Nursing Facility. Journal of Hospital Medicine, 2020, 15, 22-27.	1.4	6
12	Cognitive Biases Influence Decisionâ€Making Regarding Postacute Care in a Skilled Nursing Facility. Journal of Hospital Medicine, 2020, 15, 22-27.	1.4	6
13	Perspectives of Clinicians, Staff, and Veterans in Transitioning Veterans from non-VA Hospitals to Primary Care in a Single VA Healthcare System. Journal of Hospital Medicine, 2020, 14, 133-139.	1.4	11
14	Abstract 288: The Veterans Affairs Patient Reported Health Status (PROST) System: An Interim Analysis. Circulation: Cardiovascular Quality and Outcomes, 2020, 13, .	2.2	0
15	What's Driving SNF Readmission Rates? Exploring Differences in Processes Between High and Low Performing Hospitals. Innovation in Aging, 2020, 4, 40-40.	0.1	0
16	Influence of Context as a Key Ingredient for High Performance on Skilled Nursing Facility Readmissions. Innovation in Aging, 2020, 4, 39-40.	0.1	0
17	Perceived Costs of Care Influence Postâ€Acute Care Choices by Clinicians, Patients, and Caregivers. Journal of the American Geriatrics Society, 2019, 67, 703-710.	2.6	20
18	Characteristics of effective collaboration: A study of Nurse-Family Partnership and child welfare. Child Abuse and Neglect, 2019, 95, 104028.	2.6	20

#	Article	IF	CITATIONS
19	Using the Practical, Robust Implementation and Sustainability Model (PRISM) to qualitatively assess multilevel contextual factors to help plan, implement, evaluate, and disseminate health services programs. Translational Behavioral Medicine, 2019, 9, 1002-1011.	2.4	110
20	Risk assessment practices among home visiting nurses and child protection caseworkers in Colorado, United States: A qualitative investigation. Health and Social Care in the Community, 2019, 27, 1344-1352.	1.6	9
21	Framing advance care planning in Parkinson disease. Neurology, 2019, 92, e2571-e2579.	1.1	53
22	The advanced care coordination program: a protocol for improving transitions of care for dual-use veterans from community emergency departments back to the Veterans Health Administration (VA) primary care. BMC Health Services Research, 2019, 19, 734.	2.2	17
23	Evaluating the Quality of Patient Decision-Making Regarding Post-Acute Care. Journal of General Internal Medicine, 2018, 33, 678-684.	2.6	29
24	Systematic, Multimethod Assessment of Adaptations Across Four Diverse Health Systems Interventions. Frontiers in Public Health, 2018, 6, 102.	2.7	89
25	How Hospital Clinicians Select Patients for Skilled Nursing Facilities. Journal of the American Geriatrics Society, 2017, 65, 2466-2472.	2.6	62
26	Study protocol: improving the transition of care from a non-network hospital back to the patient's medical home. BMC Health Services Research, 2017, 17, 123.	2.2	19
27	Nurses' Role in Managing "The Fit―of Older Adults in Skilled Nursing Facilities. Journal of Gerontological Nursing, 2017, 43, 11-20.	0.6	11
28	Widespread <i>Bordetella parapertussis</i> i>Infectionsâ€"Wisconsin, 2011â€"2012: Clinical and Epidemiologic Features and Antibiotic Use for Treatment and Prevention. Clinical Infectious Diseases, 2015, 61, 1421-1431.	5.8	21
29	Completeness and Accuracy of the Wisconsin Immunization Registry. Journal of Public Health Management and Practice, 2015, 21, 273-281.	1.4	23
30	Reply to Decker et al. Journal of Infectious Diseases, 2015, 211, 498-499.	4.0	0
31	Estimating the Effectiveness of Tetanus-Diphtheria-Acellular Pertussis Vaccine (Tdap) for Preventing Pertussis: Evidence of Rapidly Waning Immunity and Difference in Effectiveness by Tdap Brand. Journal of Infectious Diseases, 2014, 210, 942-953.	4.0	139
32	Strengthening community-based care for vulnerable children in Ethiopia: A mixed-method evaluation of program reach and community capacity development. Vulnerable Children and Youth Studies, 2013, 8, 135-148.	1.1	1