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PBRN Research to Watch

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Beyond the Plan II
April 23-24, 2014
Madison, Wisconsin
Session plan

• Overview of PHSSR and PBRN (K. Gearin)
• Cross Jurisdiction Shared Services Arrangements in Local Public Health in Wisconsin (S. Zahner)
• Measuring collaboration between primary care and public health in Wisconsin, Washington, Colorado and Minnesota (K. Gearin)
• Research and accreditation (S. Zahner)
• Discussion (All)
Why study public health practice?

“The Committee had hoped to provide specific guidance elaborating on the types and levels of workforce, infrastructure, related resources, and financial investments necessary to ensure the availability of essential public health services to all of the nation’s communities. However, such evidence is limited, and there is no agenda or support for this type of research, despite the critical need for such data to promote and protect the nation’s health.”

—Institute of Medicine, 2003
Fundamental research questions

Which programs, interventions, policies, strategies (mechanisms) in which institutional & community settings (contexts)

work best (outcomes)
What is Public Health Systems and Services Research (PHSSR)?

A field of inquiry examining the organization, financing, and delivery of public health services at local, state, and national levels, and the impact of these activities on population health.

Mays, Halverson, and Scutchfield, 2003
What can we learn through PHSSR?

- Measuring practice & performance
- Detecting variation in practice
- Examining determinants of variation
  - Organization
  - Financing
  - Workforce
- Determining consequences of variation
  - Health outcomes
  - Economic outcomes
- Testing strategies to reduce harmful, unnecessary, & inequitable variation in practice and outcomes
<table>
<thead>
<tr>
<th>Intervention Research</th>
<th>Services/Systems Research</th>
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<tr>
<td>- What works - proof of efficacy</td>
<td>How to organize, implement and sustain in the real world</td>
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<td>- Controlled trials</td>
<td>• Reach</td>
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<td>- <em>Guide to Community Preventive Services</em></td>
<td>• Quality/Effectiveness</td>
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<td>• Cost/Efficiency</td>
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<td>• Equity/Disparities</td>
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<td>• Impact on population health</td>
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Public Health Practice-Based Research Networks

First cohort (Launched December 2008)
Second cohort (Launched January 2010)
Affiliate/Emerging PBRNs
National Coordinating Center

WPHRN
Wisconsin Public Health Research Network
Improving Public Health Practice Through Research

Minnesota Public Health RESEARCH TO ACTION NETWORK
PBRN Research to Watch
Study 1

• Background
  – Forecasts of future LHD funding reveal limited prospects for increases (Reschovsky & Zahner, 2013)
  – Pressure to improve quality and performance of essential public health services (PHAB, 2013)
  – Questions on capacity to meet accreditation standards (Libbey & Miyahara, 2011)
  – Population growth, mission expansion
• Inter-organizational collaboration
  – “Any joint activity by two or more agencies that is intended to increase public value by their working together rather than separately” (Bardach, 1998)
  – Common between local public health organizations
    • 50% US (Vest & Shah, 2012)
    • 71% Wisconsin (Madamala, et al, 2014)
  – Motivations
    • Saving costs and improving service quality (Kaufman, 2010)
    • Better use of resources, providing better services, responding to program requirements (Madamala, et al, 2014)
Factors associated with more inter-organizational collaboration:

• Similar domains and goals
• Recognize interdependence and benefits
• Prior ties
• Leadership
• Prevailing community norms or institutional pressure
• Mandates
“Collaboration should be valued only if it produces better organizational performance or lower costs than can be had without it. We should not be impressed by the idea of collaboration per se.” (Bardach, 1998)

- Lack evidence on cost-savings or improved outcomes resulting from cross-jurisdiction sharing
- Lack evidence about implementation and functioning of cross-jurisdiction sharing
- Lack evidence about characteristics of models that succeed in achieving expected outcomes
Cross-jurisdictional shared services arrangements in local public health

• Build on “Current and planned shared service arrangements among Wisconsin’s local and tribal health departments” (PI: N. Young; 2012)
• Funding: Robert Wood Johnson Foundation
• 2014-2015
• $198,749
• Staff:
  – Co-Project Directors: Susan Zahner & Kusuma Madamala
  – Project assistants: Tracy Mrochek & Adam Karlen
Partners

Organizations
• Institute for Wisconsin’s Health, Inc.
• Network for Public Health Law
• Center for Sharing Public Health Services
• WALHDAB
• Northwoods Collaborative

Study Advisory Team
• Linda Conlon, Oneida County Health Department
• Darren Rausch, Greenfield Health Department
• Bob Leischow, Wisconsin Association of Local Health Departments and Boards and Clark County Health Department
• Angela Nimsgern, DPH, Northern Regional Office
• Kim Whitmore, DPH
• Chris Dobbe, Northwoods Collaborative
• Gianfranco Pezzino, Center for Sharing Public Health Services
• Nancy Young, Institute for Wisconsin’s Health, Inc.
Cross-jurisdictional shared services arrangements in local public health

Specific Aims

1. Describe SSA and LTHD characteristics, motivations, and expected outcomes
2. Measure extent of implementation
3. Measure performance in achieving expected outcomes
4. Analyze effects of SSA and LTHD characteristics on implementation and performance
5. Document change in SSA use and motivations compared to baseline (2012)
Cross-jurisdictional shared services arrangements in local public health

Study framework

SSA features → Implementation → Performance → Outcomes

LTHD features

SSA features

Implementation

Performance

Outcomes

LTHD features
Cross-jurisdictional shared services arrangements in local public health

*Data collection*

**Phase One**
- IRB approval
- Invite participation and sharing of written SSA
- Collect written SSA
- Extract SSA features from SSA
- Interview LTHD directors
- LPHS data for LHD characteristics

**Phase Two**
- IRB approval
- Survey
Cross-jurisdictional shared services arrangements in local public health

**SSA Definition:**

- “A written document that describes, defines, or governs sharing of resources across jurisdictions on an ongoing or as needed basis. Shared resources may include, but are not limited to, organizational functions, staffing, programs, services, capacity, data, information, and technical assistance.”

- At least 2 LTHD

- In place after January 1, 2011
Cross-jurisdictional shared services arrangements in local public health

Translation and dissemination

1. Guided by SAT
2. Recommendations for practice and policy
3. 2 Webinars on best practice recommendations
4. Report on legal aspects for NPHL newsletter
5. Research-policy briefs (CSPHS, WPHPRN)
6. Video format research brief for CSPHS website
7. Conference presentations (research and practice)
8. Peer reviewed publication

WPHRN
Wisconsin Public Health Research Network
Improving Public Health Practice Through Research

http://www.wphrn.org/
IOM has called for greater integration of primary care and public health

- Develop a national strategy and investment plan for the creation of a primary care and public health infrastructure strong enough and appropriately integrated to enable the agencies to play their appropriate roles in furthering the nation’s population health goals

- Create common research and learning networks to foster and support the integration of primary care and public health to improve population health

- Link staff, funds, and data at the regional, state, and local levels...

www.iom.edu/primarycarepublichealth
What do you mean by integration?

…the linkage of programs and activities to promote overall efficiency and effectiveness and achieve gains in population health.
Purpose of the Study

**Primary Care and Public Health**

- Develop measures and use them to identify differences in integration.
- Identify factors that facilitate or inhibit integration.
- Examine the relationship between extent of integration, and services and outcomes in select areas (immunizations, tobacco use, and physical activity).
Why is this study unique?

• One of the first studies to examine
  – the full range of integration at the local jurisdictional level
  – local characteristics associated with differences in integration

• Engaging public health and primary care practice-based research networks at each phase of the study
Why is this important?

- The study gives voice to what is needed at the local level to advance a collaborative working relationship.

- Findings will be used to identify and promote infrastructure and capacity needed to increase collaboration.

- The study will develop and test measures that could be used to monitor changes those relationships over time.

- The study contributes to stronger relationships, which paves the way for future collaborations.
How will you conduct the study?

The study combines existing health data with new data collected through telephone interviews, an on-line survey, and focus groups.

**February-April 2014:** Conduct key informant interviews  
**April-June 2014:** Qualitative analysis, present early findings  
**June-December 2014:** Online survey development & testing  
**Early 2015:** Field online survey  
**2015:** Quantitative analysis, mixed methods analysis  
**2016:** Translation and dissemination activities, including convening focus groups
Multi-state Partners

**Colorado:**
Don Nease (Primary Care)
Lisa Van Raemdonck (Public Health)

**Washington:**
Laura-Mae Baldwin (Primary Care)
Betty Bekemeier (Public Health)

**Wisconsin:**
David Hahn (Primary Care)
Susan Zahner (Public Health)

**Minnesota:**
Beth Gyllstrom (Public Health)
Kevin Peterson (Primary Care)
Wisconsin-Phase 1

- UW-Madison Social Sciences IRB
- Interviews
  - 5 LHD directors
  - 5 Primary care contacts
- Telephone
  - David Hahn, WREN, UW SMPH/Dept of Family Medicine
  - Susan Zahner, WPHRN, UW-Madison SoN
Purpose:

*Links public health practitioners and researchers to answer questions and disseminate discoveries that can be applied to improve public health practice and population health*

Activities:

- Facilitate connections between practice and research
- Disseminate information on funding & educational opportunities
- Support/endorse/generate/conduct research projects
- Translate and disseminate findings from PHSSR

Join the network at:

[http://www.wphrn.org/join.html](http://www.wphrn.org/join.html)
Accreditation and Research

“Domain 10: Contribute to...and apply...the evidence”

Participate
- Advisory
- Informant
- Investigator

Promote
- Projects
- Funding

Disseminate
- Critique
- Prepare
- Share

Create the agenda
- Identify RQ
- Prioritize RQ
Questions?
Acknowledgements

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We invite your comments!

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