

Issue #93

PBRN Week in Review | Sep 30 2011

PBRN Grantees: Please circulate relevant information to network members. To request additional information or make suggestions for future items, please contact the Public Health PBRN National Coordinating Center (NCC) at publichealthpbrn@uams.edu or (501) 551-0106. Past issues are available in the newsletter archive.

Notable PBRN Activities

- **RACE Supplements.** RWJF has emailed letters of agreement for signature to recipients of Research Acceleration and Capacity Expansion (RACE) supplemental awards. Upon receipt of the letter signed by the authorized official, the Foundation will send a second email with the official award notification. Remember − no formal announcement or news release about the grant award may be issued until you receive the official award email! We will highlight these eight exciting projects very soon!
- ▶ Multi-network RFP. As mentioned by Glen Mays on this month's PH PBRN monthly research conference, the Coordinating Center is exploring opportunities for conducting large scale multinetwork studies through the Public Health PBRNs. Angela Dearinger will be conducting interviews with PBRN leaders to identify interests, opportunities, and data resources.
- ▶ PH PBRN October Research Conference. The Public Health PBRN Monthly Research Conference will be on Thursday, October 20 from 1:00 to 2:30 p.m. ET. Representatives of the Massachusetts PH PBRN will present findings from their research. Participants will have the opportunity to discuss the study results. Please submit items for the agenda to the Coordinating Center e-mailbox.
- Research on Public Health Model Practices. Leaders from Public Health PBRNs convened by conference call this week with leaders at NACCHO, other public health researchers and "pracademics" around the country to discuss opportunities for research involving NACCHO's compendium of Model Practices. Model Practices are public health strategies that have been ground-tested in local public health agencies, subjected to evaluation, and vetted by peers through a review process administered by NACCHO. There is considerable interest in moving at least some of these practices "up the evidence hierarchy" by subjecting them to more rigorous scientific study and in conducting research on the implementation and impact of these practices in different public health settings. If you are interested in learning more about this effort, contact staff at the National Coordinating Center.
- Advancing the Science of QI in Public Health. Members of the Minnesota and Wisconsin Public Health PBRNs convened in a retreat this week to discuss research in progress regarding the implementation and impact of QI strategies in public health settings, and developing a taxonomy of public health QI projects and outcomes. Bill Riley from the University of Minnesota facilitated the activities, along with Glen Mays from the Coordinating Center and NAC member Paul Halverson from the Arkansas Department of Health. The

Minnesota network is making great strides in developing the QI taxonomy and in studying QI culture and its consequences across diverse public health settings in the state. Stay tuned for more findings and practice implications from this important line of inquiry.

▶ Quick Look at a Quick Strike. Through its Quick Strike Research Fund (QSRF) award, the New York Public Health PBRN is developing the initial phase of a data system that will bring together multiple sources of information on local public health services and spending into one system of comparable data for use by practitioners, researchers and policymakers.

New York State's 58 local health departments (LHDs) rely on a combination of local appropriations, grants, state aid and revenue from fees, fines and third party reimbursement to support the delivery of local public health services. In 2009, total resources equaled about \$1.25 billion. The state health department's Article 6 state aid program provides a substantial amount of this funding, and the 2005 NACCHO survey data showed substantial variation in total state-level expenditures by LHDs. New York State's per capita spending was the highest at \$143.60.

To receive reimbursement through the Article 6 state aid program, LHDs are required to complete a Community Health Assessment every four years that describes the health status of community residents and the need for public health services; a four-year Municipal Public Health Services Plan (MPHSP) that describes the services they will provide in each basic service area; and an annual state aid application that specifies the total budget to be used to support delivery of these services.

The NY PH PBRN is creating the initial database using the services data sets from the 2010-2013 MPHSP submissions and the 2009 and 2010 state aid applications for comparison to data on expenditures by service area and intended purpose. Ultimately, the data system will enable policy makers to understand the types of services that LHDs deliver across the state in basic service areas, total and per capita spending on each basic service, and changes in spending due to various factors. The data system will enable researchers to examine spending over time, make comparisons by service area, assess the impact of economic cycles, and compare spending to outcomes. During this project period, the system will be used to produce simple descriptions by type of LHD, size and region.

▶ New RWJF Guidelines and Policies for Projects Involving Surveys/Polls. The Foundation has released new guidelines and policies for projects that include the implementation and reporting of surveys or polls. Make sure to review these carefully before undertaking new data collection activities. Access the guidelines here.

Related Developments in Research and Practice

New Resources to Transform Public Health Practice. All of the PBRN grantees and many affiliates are located in states where Community Transformation Grants were awarded by CDC this week. Awards were made in two categories of activities-implementation of proven interventions to improve health and building capacity to establish sustainable prevention efforts. Recipients will work in the priority areas of tobacco-free living, active living/healthy eating, and quality clinical and preventive services. Since activities are still being finalized, PBRNs still may have time to explore opportunities to collaborate within and across states, to harmonize data gathering efforts, and/or to monitor data to use for other studies. Check out the project descriptions in states where populations served are similar to those in your state.

- Proposed Changes to Research Regulations May Impact PBRN Research: HHS is inviting comments on proposed changes to the federal Common Rule -- regulations governing research involving human subjects -- including several changes with direct relevance to PHSSR and PBRNs. Among the proposed changes are: (1) revising the "exempt" category for low-risk studies to include new protections and cover a broader array of studies; (2) revising review criteria for *quality improvement research*, *public health research*, *and program evaluation* activities; and (3) streamlining IRB review for *multi-site studies*. Make sure to review these proposed changes and provide your feedback to HHS. Federal Register notice.
- ➤ Campaign to Save a Million Hearts: CDC Director Tom Frieden and CMS Director Don Berwick describe a new large-scale federal campaign to increase the uptake of evidence-based clinical and public health interventions and thereby prevent 1 million heart attacks and strokes over the next five years in this week's NEJM. Research opportunities abound with this effort.

Activities on the Horizon

- ★ AcademyHealth Methods Courses for PH PBRNs. The AcademyHealth Summer Methods Webinars for PH PBRNs are available until October 15. Invite network partners to take these courses and/or schedule sessions for group participation:
 - Best Practices in Designing and Analyzing Internet Surveys for HSR
 - Analysis of Social Networks Part I: The Network Perspective and Network Data
 - Applied Propensity Score Analysis I
 - Multilevel Modeling: A Public Health Methods Webinar

In what sessions are you most interested for the next quarter? View the <u>AcademyHealth Professional Development Catalog</u> for a comprehensive list of training opportunities and <u>email your recommendations</u> for the fall methods webinars by October 5.

♦ APHA Mix & Mingle. Perennial collaborators at the PHSSR and PBRN coordinating centers are planning a get-together at APHA. Stay tuned for more on this developing opportunity...



PHSSR Session at APHA 2011. A few seats are available! Send an email to Rebecca Brown for a reservation. On Saturday, October 29, from 12:30 to 3:30 pm ET, "Translating PHSSR to Practice" will provide an opportunity for public health researchers and practitioners attending APHA to work together addressing the challenges of translating research results to practice. Among the familiar names on the program are NAC Chair Michael Caldwell, Ohio PH PBRN Co-PI Matt Stefanak and Tennessee affiliate PH PBRN leader Paul Erwin.

Research Dissemination Opportunities

- ▶ Preventive Medicine 2012 Call for Presentation Proposals. Preventive Medicine, the annual meeting of the American College of Preventive Medicine, is accepting presentation abstracts on the topics of public health practice, clinical preventive and lifestyle medicine, prevention policy, and medical quality for its February 2012 conference. Call for Proposals. Deadline: October 24
- ▶ NIH D&I Conference Call for Proposals. The 4th Annual Conference on the Science of Dissemination and Implementation is accepting abstracts in the categories of individual and panel presentations, poster presentations, and think tanks. The conference theme is Policy and Practice, and applicants are encouraged to use this theme in preparing abstracts. Topic domains and complete details for submitting abstracts are available online. Deadline: November 12

▶ PHLR Request for Abstracts. The RWJF Public Health Law Research (PHLR) program is accepting abstracts for presentation at its annual meeting January 18-20, 2012, in New Orleans. Abstracts may be in the themes of communicable diseases, non-communicable diseases, and injury prevention. Abstracts not accepted for oral presentation will be considered for posters. See full details at the PHLR Annual Meeting site. Deadline: November 15

Resources in Research and Practice

WEBINARS

▶ **Data Harmonization?** Not exactly, but communicating data and research results to non-research audiences is the subject of *Making Data Sing*, a webinar hosted by the RWJF Human Capital group this week and available as a resource to other programs.

REPORTS, BRIEFS AND PUBLICATIONS

- Seasonal Influenza. It's hard to believe, but flu season is right around the corner. Check out the <u>CDC website</u> "for information about the 2011-2012 flu season's vaccine, recommendations, and disease activity."
- NACCHO Releases 2010 Profile Report. NACCHO is pleased to announce the availability of the 2010 National Profile of Local Health Departments (Profile) report. With a response rate of 82%, the 2010 Profile study is the most up-to-date source of information about local health departments (LHDs) in the U.S. and will be useful to a broad audience including practitioners and policymakers at the local, state, and federal level; researchers; the media; and the public. The 2010 Profile report provides a comprehensive picture of LHD governance, finance, workforce, and activities and services, including those related to emergency preparedness, quality improvement, accreditation, access to health care services, advocacy and information technology. Visit the NACCHO profile website to view the report or order a printed copy.

The 2010 Profile data set and those from earlier studies are available for researchers interested in conducting additional analyses. Among the most frequently used data sets for public health systems research, the codebook and form to request these data are available on the website. The 2010 Profile study was made possible through the support of the Robert Wood Johnson Foundation and the Centers for Disease Control and Prevention.

CONFERENCES

- **→ APHA Annual Meeting.** Washington, D.C., Oct. 29-November 2. <u>Registration and hotel info.</u> <u>APHA general meeting info.</u>
- ▶ NASHP Conference. The <u>National Academy for State Health Policy</u> (NASHP) Annual State Health Policy Conference is October 3-5 in Kansas City, Missouri.
- **→ 2012 Public Health Preparedness Summit.** PHP Summit in Anaheim, February 21-24, 2012
- → 2012 PHSSR Keeneland Conference. Lexington, April 17-19. Keeneland Conference general information.

New Literature and Exemplary Studies of Interest

▶ Mixed Methods Research. Several PH PBRNs combine quantitative and qualitative approaches to studies. A working group appointed almost a year ago by the NIH Office of

Behavioral and Social Sciences Research (OBSSR) recently published <u>Best Practices for Mixed Methods in the Health Sciences</u>, a resource for both investigators and evaluators to ensure methodological rigor.

An Agenda for Research on the Sustainability of Public Health Programs. A recent article in AJPH online by Mary Ann Scheirer and James W. Dearing provides guidance for research and evaluation of health program sustainability, including definitions and types of sustainability, specifications and measurements of dependent variables, definitions of independent variables or factors that influence sustainability, and suggestions for designs for research and data collection.

Funding Opportunities and Announcements

The NCC maintains a <u>list of funding opportunities</u> of interest to its networks. Grant opportunities with recurring deadlines are tracked and updated.

NEW LISTINGS

▶ **PCORI Pilots.** In an August newsletter, we mentioned that the <u>Patient-Centered Outcomes</u> <u>Research Institute</u> (PCORI), an independent, non-profit organization established by the ACA was soliciting comments on its initial research priorities. We noted that even with the focus on patient care, PCORI's mission of studying *prevention* and treatment options and comparing *delivery system* innovations and clinical interventions leaves the door ajar for PHSSR oriented studies.

This week PCORI announced a <u>Pilot Projects Grant Program</u> that will be used to continue development of the research agenda. According to the news release, "With this program, PCORI is interested in the development of research methods, patient-oriented outcomes instruments, patient-provider communication and other decision-making strategies, building collaborative research teams with stakeholders, translating research findings into clinical practice, stakeholder engagement, and research agenda setting strategies that can be used in future comparative effectiveness research." Deadlines: Letter of intent-November 1; Application-December 1.

- ▶ Rural Health. HRSA has announced a funding opportunity to support "projects that demonstrate effective models of outreach and service delivery through collaboration, adoption of an evidence-based or promising practice model, demonstration of health outcomes, replicability and sustainability." HRSA will award approximately 80 total awards up to \$150,000 each for a 3-year project period. Please visit the HRSA website for more information. Application Deadline: November 22.
- NIH Director's Transformative Research Awards. This R01 from the NIH Common Fund was mentioned by Glen Mays during the September research conference. According to the announcement, "The NIH Director's Transformative Research Awards complements NIH's traditional, investigator-initiated grant programs by supporting individual scientists or groups of scientists proposing groundbreaking, exceptionally innovative, original and/or unconventional research with the potential to create new scientific paradigms. Little or no preliminary data are expected. Projects must clearly demonstrate potential to produce a major impact in a broad area of biomedical or behavioral research." Full Announcement. Application Deadline: January 12, 2012

PREVIOUSLY ANNOUNCED LISTINGS

Postdoctoral Scholars Support. The Robert Wood Johnson Foundation Health & Society Scholars program is an opportunity to those who have completed their postdoctoral training to

obtain support to build research and leadership capacity for addressing population health and health policy. The award is for two years of support beginning in the fall of 2012 with an annual stipend of \$80,000 for up to 12 scholars. Please visit <u>healthandsocietyscholars.org</u> for more information and to apply. Deadline for application is September 30.

- ▶ Junior Investigator PHSSR Awards Program. The National Coordinating Center for Public Health Services and Systems Research has announced the 2011 Call for Proposals Dissertation and Junior Faculty Awards. The PHSSR Awards Program is open to doctoral candidates or junior faculty who received their initial appointment within the past 3 years. Up to 10 awards of \$10,000 each will be awarded. Deadline for proposals: October 13.
- ▶ NIH Common Fund Incentives for Prevention. The National Institutes of Health (NIH) Common Fund has released the following FOA for Economic Research on Incentives for Efficient Use of Preventive Services (R01). Letter of Intent deadline: October 15. Application Deadline: November 15.
- ▶ A Mention from Mays. A reminder to PH PBRNs with doctoral students collaborating in research projects that these students can pursue dissertation funding to support their research activities. The three biggest and best federal sources for doctoral students pursuing HSR and PHSSR research projects are NIH NRSA awards(F-31s), AHRQ's R36 awards, and NSF's Dissertation Research Improvement awards. And of course, the University of Kentucky National Coordinating Center for PHSSR offers dissertation support through the Robert Wood Johnson Foundation. The eligibility criteria and deadlines vary.
- **RWJF Public Health Law Research Rapid Response Studies.** Proposals accepted online on a rolling basis. Details available in the <u>CFP</u>.

PBRN/PHSSR Colleagues in the News

Connecticut-Rhode Island Public Health Training Center. The Yale School of Public Health is among 10 recent recipients of Public Health Training Center (PHTC) funding from HRSA. The center's principal investigator is none other than Connecticut PH PBRN Co-PI Elaine O'Keefe! With its primary location at Yale and a satellite at Brown University in Providence, this PHTC will enhance the capacity of organizations in the two states to meet their public health workforce training needs, particularly in addressing health disparities. Congratulations Connecticut colleagues and especially Elaine!

Key Dates

Oct 20	Monthly Conference Call 1:00-2:30 p.m. ET (MA PH PBRN)
Oct 29-Nov 2	APHA Annual Meeting 2011, Washington, D.C.
Nov 17	Monthly Conference Call 1:00-2:30 p.m. ET (NE PH PBRN)
Dec 15	Monthly Conference Call 1:00-2:30 p.m. ET (NC PH PBRN)
April 17-19	PHSSR Keeneland Conference 2012, Lexington