

Issue #103

Public Health PBRN Review | June 2012

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@uky.edu or (859) 218-2094. Past issues are available in the [newsletter](#) archive.

RECENT PBRN ACTIVITIES

The Political Economy of Public Health Districts. New research from the Connecticut PBRN finds that district health departments operate within a markedly different political economy for public health delivery compared to the urban city and small township health departments in the state, resulting in important differences in agency responses to the economic downturn. Overall, the state's 21 district agencies have a more diversified funding mix for their services compared to the single-municipality agencies, and the districts have experienced less recession-driven declines in revenue than their counterparts. However, the districts operate with persistently lower overall levels of funding compared to their urban city counterparts, in part because of "price competition" among the districts for member municipalities. These and other differences in political economy help to explain some of the patterns of variation and change in staffing and service delivery observed across Connecticut's local agencies, and may contribute to inequities in public health protection. Debbie Humphries of Yale University and the Connecticut PBRN shared findings during the Research-in-Progress segment of the May Public Health PBRN Virtual Meeting. The full presentation is available on the Public Health PBRN resources webpage at <http://www.publichealthsystems.org/>.

The Dismal Science Debates Public Health PBRN Research. For the first time in its history, the biennial meeting of the American Society for Health Economists featured research sessions devoted to the economics of public health delivery, and PBRN studies featured prominently in these sessions. The meeting, held June 11-13 at the University of Minnesota this year, is known for rigorously-critiquing empirical research on the most pressing economic issues confronting health systems nationally and globally. One of this year's sessions, titled "**Public Health**

Departments, Public Action, and Health,” featured research in progress by the North Carolina PBRN examining the effects of a payment policy change for maternal care coordination services delivered by local health departments. Marissa Domino, a professor of health economics at UNC’s Gillings School of Public Health, presented this work on behalf of her PBRN colleagues. This same session included a study by David Bishai and colleagues on the effects of state public health spending on maternal and child health, using a unique longitudinal data source. David is a professor of health economics in Johns Hopkins Bloomberg School of Public Health, where a growing affiliate PBRN is developing in Maryland. A second session at the meeting addressed the ***“Economics of Public Health Delivery”*** and included work by the Coordinating Center’s Glen Mays on estimating medical cost offsets attributable to public health delivery, along with work by Rexford Santerre and colleagues on estimating the demand for local public health services. Rex, a professor at the University of Connecticut, has a growing portfolio of economic studies on local health departments in his home state, and is a natural academic partner for the Connecticut PBRN. More information on these sessions can be found at the Society’s [website](#).

What Drives Variation in Public Health Quality and QI Practice? The content and quality of community health improvement initiatives vary widely across communities, creating opportunities for identifying both the determinants and the consequences of this variation. The Wisconsin PBRN’s study of this variation was featured in a session entitled ***“Expanding the Evidence Base for QI and Accreditation: Progress in PBRNs”*** at the National Network of Public Health Institute’s fourth *Open Forum Meeting on Quality Improvement in Public Health* held in Portland Oregon June 19-20. The Coordinating Center’s Glen Mays opened the session by discussing the array of studies underway within PBRNs to measure variation in the quality of public health practice, and to evaluate the implementation and impact of QI strategies. Mays stressed the importance of developing standardized measures that can be used across multiple studies of quality and QI in public health settings—a need that is being addressed through the newly-launched PBRN ***Multi-Network Practice and Outcome Variation (MPROVE)*** study. Julie Willems Van Dijk from the University of Wisconsin Population Health Institute and the Wisconsin PBRN described their recent effort

to develop and apply a tool for measuring the quality of community health assessment and improvement planning (CHA/CHIP) processes, which included: (1) creating and validating the measurement instrument; (2) applying the instrument to Wisconsin's 92 health assessment and improvement plans; and (3) conducting a comparative analysis to explore what types of structural and process variables are associated with higher-quality CHIP processes. Also in this session, Chelsie Huntley from the Minnesota Department of Health and the Minnesota PBRN described their effort to develop a screening tool for measuring the maturity of QI processes in both local and state public health settings across the state. The tool was fielded with all the state's local health departments and with all employees of the state health department, allowing the network to examine patterns of variation in QI maturity and capacity at multiple levels within the system. The Open Forum featured the work of several other PBRN leaders and collaborators, including Sylvia Pirani of the New York Department of Health (New York PBRN), and Robert Harmon of the Duval County Health Department (Florida PBRN). Archive information on meeting presentations will be available on the NNPHI [website](#) soon.

How to Right-size Public Health Delivery. A critical mass of PBRN collaborators are heading to Disneyworld to present their findings at the nation's largest gathering of health services researchers this month. Three sessions featuring PBRN research were competitively selected for presentation at the meeting this year. In one session, Nancy Winterbauer, a founding leader of the Florida PBRN and now a collaborator in the North Carolina PBRN, discusses findings from a quick-strike study to examine local public health responses to the County Health Rankings report among Florida counties. Another session features Justine Hyde (Massachusetts PBRN), Lisa VanRaemdonck (Colorado PBRN), Bill Livingood (Georgia and Florida PBRNs), and Glen Mays (Coordinating Center) presenting a cluster of related PBRN studies on the topic of "***Right-sizing Public Health Delivery: Regionalization and Multi-Jurisdictional Models.***" Later at the Public Health Systems Research Interest Group Meeting, Betty Bekemeier (Washington PBRN), Michael Morris (Florida and Arkansas PBRNs), and Glen Mays present research from the ***Public Health Activities and Services Tracking (PHAST) Study.*** This year's AcademyHealth meeting includes the largest collection of PHSSR-related research presentations ever, due to the high volume and quality of

studies submitted this year. More information is available [here](#).

Many Measures, Many Opportunities to MPROVE. Earlier this month, PBRN networks participating in the Multi-Network Practice and Outcome Variation (MPROVE) study submitted their lists of proposed measures for use in investigating local variation in public health service delivery, producing an initial inventory of more than 70 possible measures. The MPROVE study will identify a standard set of measures to collect and analyze across the diverse public health settings represented in the PBRNs, including measures of communicable disease control, chronic disease prevention, and environmental health protection. A Delphi process will be used to choose the final set of measures from this inventory, using selection criteria that include measure validity and reliability, practice relevance, and the expected health and economic impact of improvements in service delivery. More information on the MPROVE study can be obtained by emailing the PBRN Coordinating Center at publichealthPBRN@uky.edu.

June Edition of PBRN Virtual Meeting

Thursday, June 21 from 1:00-2:30pm ET

The June 2012 edition of the Public Health PBRN Virtual Meeting featured a presentation by the Florida Public Health PBRN, “Use and Impact of the County Health Rankings: Results from the Florida PBRN Study.” Dr. Bonita Sorensen, Director of the Volusia County Health Department, presented the findings from a survey of Florida Local Health Directors, describing how local health departments have used the rankings, the impact of the rankings on both communities and community health promotion efforts, the contextual factors influencing the use and impact of the rankings, and changes that occurred between 2010 and 2011 in the way local health departments used the rankings.

An archive of this presentation will be available soon on the Public Health PBRN resources webpage at <http://www.publichealthsystems.org/>.

UPCOMING PBRN ACTIVITIES

Publish Rapidly and Publish Often at the Frontiers. A respondent to the feedback survey for the 2012 Public Health PBRN Grantee Meeting (April 2012) asked “why the focus on publishing – isn’t it enough to use findings to improve practice?” The

answer, of course, is we must do both – publish and translate to practice – in order to harvest the full value of investments made in PBRNs and PBRN studies. One step without the other is failure to move down the discovery-delivery pathway. In medicine, it is not enough to order the diagnostic test and use the results of that test during the immediate patient encounter. If the test results are not recorded in the medical record for posterity, then the information is lost and the opportunities to inform the patient’s future care and the care of similar patients are gone forever. Likewise, documenting your PBRN research in a peer-reviewed, indexed publication creates a permanent record of findings and implications so that (1) others do not need to repeat the same costly and burdensome study in the future; (2) findings from your study can be cumulated with the results of similar studies to produce more definitive and more generalizable knowledge than one study alone can achieve; and (3) many others across the nation and world who are not involved in your PBRN can easily and rapidly access and use the knowledge you produced. Publishing also allows your network to establish a documented, externally-vetted record of scholarship that it can use to compete for future funding opportunities. Publishing is just one of many mechanisms for disseminating your research findings to the people who can use them, but it is a very important one.

This is why we have created the open-access, peer-reviewed journal ***Frontiers in Public Health Services and Systems Research*** to make it easier and faster to publish early findings from your research and to highlight its practice and policy implications. When you submit your brief manuscript to *Frontiers*, you will benefit from a three-stage approach to rapid and widespread dissemination. Stage One: your manuscript will be processed through a rapid, 10-week cycle time between submission, peer review, and publication of accepted manuscripts. Stage Two: After manuscripts appear in *Frontiers*, they are highlighted in a special department of the *American Journal of Preventive Medicine* (print and electronic versions), allowing you to reach an even larger audience and helping to drive that audience to your original *Frontiers* article. Stage Three: if you develop a full scientific manuscript after publishing the initial findings in *Frontiers*, your full scientific article is eligible to receive expedited review at the *American Journal of Preventive Medicine*. No other journal offers this level of intensity in dissemination. We are currently developing a special issue of *Frontiers* featuring the QI Quick Strike Studies funded through the PBRN program last year. Please make sure that

you and your PBRN colleagues: (1) sign up to receive article alerts from *Frontiers*; (2) submit your early findings to *Frontiers* as soon as you have them in hand, because data are perishable; and (3) agree to serve as a peer reviewer for *Frontiers* submissions, and occasionally agree to write a commentary for *Frontiers* on articles that fall within your areas of expertise. *Frontiers* is your dissemination vehicle – your part of the “open science” movement – so please use it and share it with your colleagues and collaborators. See www.FrontiersinPHSSR.org for more information.

The Value of Public Health Investments. At the American Public Health Association’s Mid-Year Meeting in Charlotte North Carolina, Glen Mays will profile research underway through the PBRN Program and the PHSSR Coordinating Center to quantify the economic impact and value of investments in public health services and delivery systems. This session is scheduled for Thursday June 28. More information [here](#).

Evidence on Shared Services and Economic Shocks. The NACCHO Annual Meeting scheduled for July 11-15 in Los Angeles will include several important sessions on PBRN studies as part of its practice-based research track. In the first of these sessions, Justine Hyde (Massachusetts PBRN), Lisa VanRaemdonck (Colorado PBRN), and Bill Livingood (Georgia and Florida PBRNs) will examine the policy and practice implications that flow from ongoing PBRN studies of “shared service” arrangements that allow multiple local jurisdictions to collaborate in the delivery of public health services. A second session will feature Jennifer Kertanis (Connecticut PBRN) presenting research on public health funding cuts and consolidation activities among local health departments, along with Betty Bekemeier (Washington PBRN) presenting research from the PHAST study on the geographic incidence of funding and service reductions in public health. More information on the NACCHO conference is available [here](#).

July Edition of PBRN Virtual Meeting

Thursday, July 19 from 1:00-2:30pm ET

The July 2012 edition of the Public Health PBRN Virtual Meeting will feature a presentation by the Colorado Public Health PBRN. “Dynamic System Changes in Colorado: How the Colorado PHPBRN has Conceptualized System Changes as a Result of the Public Health Act of 2008” will describe results and ongoing analyses of several research projects that relate to Colorado’s 2008 public health modernization act, which was modeled after the Turning Point Model Act. The

webinar will look at changes made after several phases of rule-making and implementation, as well as describe ongoing questions from practice partners on the indirect system pressures and changes resulting from the Act.

Please email any additional items you would like to add to the agenda to publichealthPBRN@uky.edu.

PBRN Quarterly Skill-Building Webinar Developing Community-Based Grant Proposals: A Reviewer's Perspective Monday, July 30, 2012 from 1-2:30pm

ET This webinar will focus on the potential for leveraging community-based participatory research funding to support Public Health PBRN research. After providing an overview of common proposal review processes used by many research funding entities, National Coordinating Center Deputy Director Anna Goodman Hoover will describe the guiding principles of Community-Based Participatory Research (CBPR), identify potential funders of participatory research, and discuss unique challenges for crafting community-based grant proposals. The webinar will include an overview of key participatory research literature, a discussion of two common types of participatory proposal errors, and a discussion of possible red flags for reviewers, all with an eye toward helping PBRNs develop strong, connected, highly-fundable participatory research projects. Registration information will follow.

WEBINARS

NIEHS Partnerships for Environmental Public Health Webinar: Health Impact Assessments and Community Engagement

Friday, June 29, 2012 from 12-1:30 pm ET

This webinar will feature Aaron Wernham with the PEW Charitable Trusts and Arthur Wendel with the Centers for Disease Control and Prevention. Registration is free and available online [here](#).

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ANNOUNCEMENTS

Most Notable Articles of 2011. The AcademyHealth's Public Health Systems Research Interest Group has selected an article contributed by collaborators in the North Carolina PBRN as a finalist for the Article-of-the-Year Award. This award, sponsored by the Robert Wood Johnson Foundation, honors the best scientific work that the field of PHSR has produced and published in 2011. The winner will be recognized at AcademyHealth's Annual Research Meeting and the PHSR Interest Group Annual Meeting, June 24-June 27, 2012, in Orlando, Fla. The North Carolina article, entitled "Informing the National Public Health Accreditation Movement: Lessons From North Carolina's Accredited Local Health Departments", was authored by Mary V. Davis, Margaret M. Cannon, David O. Stone, Brittan W. Wood, Joy Reed, and Edward L. Baker and is available in the September 2011 issue of the *American Journal of Public Health*.

Award finalists were selected for: 1) contribution to the understanding of public health systems; 2) provision of new insights to the field of PHSR; and 3) potential to advance the field and/or challenge current thinking. Other finalists are:

- Julie Darnell. "What is the Role of Free Clinics in the Safety Net?" November 2011, Vol. 49, No. 11, *Medical Care*

- Susan dosReis et al. "Antipsychotic Treatment Among Youth in Foster Care" December 2011, Vol 128, No. 6, *Pediatrics*
- Glen P. Mays and Sharla A. Smith. "Evidence Links Increases in Public Health Spending to Declines in Preventable Deaths." August 2011, Vol. 30, No. 8, *Health Affairs*
- Bobby Milstein et al. "Why Behavioral and Environmental Interventions Are Needed to Improve Health at Lower Cost" May 2011, Vol. 30, No. 5, *Health Affairs*

NNPHI Announces 30 Public Health Agencies to Receive Funding and Assistance for QI. The National Network of Public Health Institutes (NNPHI) has selected 30 health departments to receive \$5,000 awards, coupled with individualized quality improvement (QI) coaching, to conduct QI projects that help make public health programs more efficient and effective. The QI Award Program supports health departments to implement QI; meet the accreditation standards and measures set by the Public Health Accreditation Board (PHAB); and conduct projects that apply QI methods and tools to improve processes and outcomes related to a range of public health issues. The complete list of the 30 health department sites is available from the NNPHI [website](#).

RWJF Announces New Program, Funding to Support Shared Service Delivery Models in Public Health.

Public health agencies are using cross-jurisdictional sharing (CJS) or the sharing of services, resources and functions across multiple public health agencies and jurisdictions as a way to cope with the challenges of lean fiscal environments and burgeoning costs of chronic disease. In order to better understand the opportunity and impact of CJS among public health agencies, the Robert Wood Johnson Foundation (RWJF) will fund two-year grants of \$125,000 to 18 interdisciplinary teams across the country; consisting of public health officials, policymakers, and other stakeholders that are exploring, implementing or improving cross-jurisdictional sharing arrangements between two or more public health agencies, to participate in the Shared Services Learning Community. This Shared Services Learning Community will be managed and convened by the

Center for Sharing Public Health Services, housed at the Kansas Health Institute and supported by RWJF. Led jointly by Patrick Libbey and Gianfranco Pezzino, the Center for Sharing Public Health Services supports efforts to explore, inform, track and disseminate learning about shared approaches to delivering public health services with the goal of increasing the ability of public health agencies to improve the health of the communities they serve. More information on the CFP [here](#). More information on the Center for Sharing Public Health Services [here](#).

Pilot Projects in Comparative Effectiveness Research. The Patient Centered Outcomes Research Institute (PCORI) PCORI has approved 50 research funding awards, totaling \$30 million over two years, through its Pilot Projects Program, which will address a broad range of questions about methods for engaging patients and communities in the health research and dissemination processes. All awards have been approved pending completion of a business review and a formal award agreement with PCORI. Details on all awards, including the project name, primary investigator, research institution, funding amount and an abstract, are provided on the PCORI [website](#).

New Health System Measures. HHS has launched the Health System Measurement Project, which brings together trend information on approximately 50 key health system-related measures across ten topical areas. The measures are expected to be useful for designing and implementing system-level research studies, along with other uses. Details [here](#).

NIH Releases New Web Tool for Researchers. A new interactive anthology, known as [e-Source](#), will provide investigators with the latest research methods and tools to address emerging challenges in public health. More information on this resource can be found in the press release from the National Institutes of Health, [NIH News](#).

Call for Papers and Products

Maximizing Community Contributions, Benefits & Outcomes in Clinical & Translational Research

Deadline: August 6, 2012

Progress in Community Health Partnerships (PCHP), CES4Health.info (CES4H), and the Albert Einstein College of Medicine of Yeshiva University have collaborated to release a Call for Papers and Products on the theme of "Maximizing Community Contributions, Benefits, and Outcomes in Clinical and Translational Research". PCHP is a peer-reviewed print and online journal that publishes articles on community-partnered research, education, and programs that improve the public's health. CES4H is an online mechanism for peer-reviewed publication and dissemination of diverse products of community-engaged research, education, and programs that are in forms *other than* journal articles (e.g., training videos, curricula, policy reports, assessment tools, online toolkits). The goal in releasing this themed call is to highlight the perspectives and voices of community partners of Clinical and Translational Science Awardees (CTSAs) and other research institutions in the full spectrum of clinical and translational research conducted with the intention of improving the health of communities. More details are available [here](#).

Health Services Research Special Issue on Mixed Methods in Healthcare Delivery Systems Research Deadline: October 15, 2012

Health Services Research and the Agency for Healthcare Research and Quality (AHRQ) are publishing a Special Issue on Mixed Methods in Healthcare Delivery Systems Research. For more information about this call for papers, please see the announcement at the [HSR website](#), or consult the "[Instructions for Authors](#)" prior to [submission](#). For questions, please email HSR Managing Editor, [Meighan Schreiber](#).

Journal of Public Health Management and Practice Special Issue on Linkages between Public Health Practice Agencies and Academic Institutions

Deadline: September 30, 2012

The Journal of Public Health Management and Practice (JPHMP), in collaboration with the [Academic Health Department Learning Community of the Council on Linkages Between Academia and Public Health Practice \(COL\)](#), the [National Association of County and City Health Officials \(NACCHO\)](#) and the [Association of State and Territorial Health Officials \(ASTHO\)](#) invites practitioners and researchers to submit abstracts for articles to appear in the November-December 2013 issue of the JPHMP; co-edited by Paul Campbell Erwin, MD, DrPH, Professor and

Department Head, Department of Public Health, University of Tennessee and C. William Keck, MD, MPH, Professor Emeritus, Department of Family and Community Medicine, Northeast Ohio Medical University; under the theme of Academic Health Departments.

Purpose: Linkages between public health practice agencies and academic institutions have existed for many decades. Typically, these linkages join a health professions school and a state or local health department, although other public health practice organizations may be involved. Their intent is to enhance public health training, research and service by facilitating collaboration across academic and practice communities. Although the Academic Health Department concept has been in existence for at least three decades, the literature about the nature, development, management and impact of these partnerships is sparse. In the aggregate, little is known about the extent of these relationships; the particular factors that support or detract from success; the nature of formal affiliation agreements including the sharing of resources, risks and rewards; or the outcomes that might be expected. We hope to expand the knowledge base about all elements of Academic Health Departments.

Call for Abstracts: Abstracts providing case examples of relationships between public health academic and practice organizations that would include such topics as:

- Reasons for considering the development of formal linkages.
- Problems encountered and overcome in the development process.
- Key elements related to success (or failure) of partnerships.
- Important points included in formal affiliation agreements including responsibilities of each partner, governance, sharing of resources, joint funding of positions, authorship of journal articles, and so on.
- Specific outcomes in teaching, research or community health impact credited to the partnership.

Submission of abstracts (approximately 500 words) is invited for consideration for the development of an article (12 double-spaced pages) to be published in the November-December, 2013 edition of the JPHMP. Selection and

Notification: Abstract authors selected to submit a full article will be notified by October 30, 2012. Full manuscripts (2000-3000 words) will be due by February 1, 2013.

Abstracts should be submitted to Lloyd F. Novick, MD, MPH, Editor, Journal of

Public Health Management and Practice at novickl@ecu.edu

Call for Abstracts

2012 Summit on the Science of Eliminating Health Disparities: Integrating Science, Policy, and Practice

Meeting: October 31-Nov. 3, 2012

Abstract Deadline: June 15, 2012

The National Institutes of Health, in coordination with the Department of Health & Human Services, Office of Minority Health, and the National Institute on Minority Health Disparities, will be holding the 2012 Summit on Science of Eliminating Health Disparities: Integrating Science, Policy, and Practice; Building a Healthier Society—from October 31 through November 3, 2012 at the Gaylord National Resort and Convention Center in National Harbor, Maryland. Each of the three tracks covers areas that are of particular concern to PH PBRNs:

1. **Translational and Transdisciplinary Research Science** or research abstracts might include basic and applied, health services, patient-oriented, epidemiological, environmental, behavioral, and social sciences research related to health disparities. Policy-oriented abstracts delve into policies linked to health or healthcare, or other areas impacting health such as public, social, and economic policies. Practice abstracts examine public health practice related to community health, healthcare, or social services delivery, and education and training.
2. **Capacity-Building and Infrastructure**
The challenges and opportunities associated with building capacity for research, public health and primary care practice, services delivery, training, and education. These presentations will also investigate the implementation and sustainability of infrastructure and economic development in disparate communities.
3. **Outreach, Partnerships, Collaborations, and Opportunities**
A venue for representatives from various agencies and organizations to showcase their innovative partnerships, outreach, and dissemination efforts, including successful collaborations on addressing health disparities.

More information can be found [here](#).

Request for comments on a draft EPA publication

Creating Equitable, Healthy, and Sustainable Communities: Strategies for Advancing Smart Growth, Environmental Justice, and Equitable Development

Communities across the country are integrating smart growth and environmental justice approaches to achieve development that is healthy, environmentally and economically sustainable, and beneficial for all residents, regardless of race, ethnicity, and income. *Creating Equitable, Healthy, and Sustainable Communities: Strategies for Advancing Smart Growth, Environmental Justice, and Equitable Development* aims to build on past successes and help other low-income, minority, tribal, and overburdened communities implement their own versions of equitable development. It identifies strategies that bring together smart growth and environmental justice principles and goals and can be used by community-based organizations, local and regional decision-makers, developers, and other stakeholders to shape land use decisions where they live.

To ensure that this publication is as helpful as possible for communities, **EPA is soliciting comments on the draft through July 6, 2012**. For more information, please visit <http://www.epa.gov/smartgrowth>.

Congratulations

The Robert Wood Johnson Foundation marks its 40th year as a national philanthropy. Help RWJF celebrate this milestone by sharing your stories at <http://www.rwjf.org/40years/>.

Hats off to AcademyHealth PHSR Student Scholarship Recipients Rachel Hogg, a Research Assistant for the Public Health PBRN National Coordinating Center, and Kristina Rabarison, a Research Assistant for the National Coordinating Center for PHSSR. The scholarship recognizes graduate students who demonstrate potential to contribute to the field of PHSR through promising research.

National TV appearance by Dr. Glen Mays

Dr. Mays appeared on *BioCentury This Week*, public affairs broadcast program, to discuss the Institute of Medicine's calls for: 1) setting a life expectancy goal in the U.S.; 2) including prevention in comparative effectiveness studies; and 3) establishing a healthcare transaction tax. Watch [here](#).

PUBLICATIONS

U.S. Department of Health and Human Services Releases *National Prevention Council Action Plan* On June 13, U.S. Surgeon General Regina Benjamin, chair of the [National Prevention Council](#), commemorated the one-year anniversary of the release of the [National Prevention Strategy](#) with the release of the [National Prevention Council Action Plan](#). The Action Plan showcases more than 200 specific prevention and wellness actions being currently undertaken by federal departments and agencies aimed at increasing quality of life, eliminating health disparities, promoting healthy behaviors, and creating healthy social and physical environments.

Special Issue on Public Health Financing. The July issue of the *Journal of Public Health Management and Practice* includes a series of articles examining the policy issues and practice implications of financing mechanisms for public health services. Just a few of the many topics addressed include harmonized spending estimates from the NACCHO and ASTHO surveys; funding formulae for public health services; and the political dynamics of public health financing. More information is [here](#).

Canadian PHSSR Think Tank Report

Canada's Core for Public Health Functions Research Initiative held the pan-Canadian Public Health Systems and Services Think Tank in Montréal last year with the purpose of identifying PHSSR priorities, moving toward consensus on a PHSSR agenda, and initiating the establishment of a PHSSR network. Canadian public health researchers, practitioners, and policymakers were joined by three international advisors chosen for their public health systems and services expertise: Dr. Douglas Scutchfield from the University of Kentucky; Dr. Peter Jacobson from the University of Michigan; and Professor David Hunter from Durham University. Findings from the Think Tank report are available [here](#).

NACCHO

NACCHO just released the [full report](#) on its most recent Job Losses and Program

Cuts survey. Fifty-seven percent of all LHDs reduced or eliminated services in at least one program area in 2011, a larger percentage than in any 12-month period since the recession began. Read the [full report](#) to learn more about the workforce, program, and budget cuts and related effects on LHDs and the communities they serve.

Public Health Activities and Services Tracking

An article by Betty Bekemeier (Washington PH PBRN) published in the online journal *Northwest Public Health*, highlights the use of the PHAST database to investigate practical research questions and to provide a better evidence base for public health practice and decision making. The complete article citation is: Bekemeier, B. (2012). Tracking local public health services to inform decision making. *Northwest Public Health*, Spring/Summer 29(1), 14-16. The full article is available [here](#).

ELECTRONIC RESOURCES

Public Health Information Access Project

The [National Library of Medicine](#) (NLM), [National Institutes of Health](#) (NIH), and the [U.S. Department of Health and Human Services](#) (HHS), [Office of Disease Prevention and Health Promotion](#), have worked together to develop pre-formulated search strategies (structured evidence queries) that search high-quality, peer-reviewed scientific literature to identify research evidence for selected [Healthy People 2020](#) objectives. These one-click strategies search [PubMed](#), an NLM database that provides access to millions of citations from MEDLINE, life science and public health journals, and online books. This Partners in Information Access for the Public Health Workforce is a collaboration of U.S. government agencies, public health organizations, and health sciences libraries. The purpose of PHPartners is to help the public health workforce find and use information effectively to improve and protect the public's health. Details can be found [here](#).

A New Taxonomy for Stakeholder Engagement in Patient-Centered Outcomes Research (PCOR) A new article in the *Journal of General Internal Medicine*

addresses three key questions: (1) who are the stakeholders in PCOR; (2) what roles and responsibilities can stakeholders have in PCOR; and (3) how can researchers start engaging stakeholders? The full article is available online [here](#).

FUNDING OPPORTUNITIES

View current and archived funding opportunities at the Public Health PBRN website: <http://www.publichealthsystems.org/pbrn-funding-opportunities.aspx>.

New Listings

RWJF Announces New Program, Funding to Support Shared Service Delivery Models in Public Health. See above

Mentored Science Awards in PHSSR: A new round of funding opportunities from the National Coordinating Center for PHSSR and the Robert Wood Johnson Foundation (RWJF) seek to develop the next generation of researchers who will examine how the organization, financing, and delivery of public health services affect population health. As many as eight Mentored Research Scientist Development Awards of up to \$100,000 each for two years will support early-career investigators and enable them to establish independent research careers in PHSSR. The awards are designed to enhance the researchers' career development experiences, help them attain advanced research skills in PHSSR and position them for other funding opportunities. Visit www.rwjf.org/cfs/phssrmrs and use the *Apply Online* link. You may be required to register at <http://my.rwjf.org> before you begin the application process.

Comparative Effectiveness Research Funding. Applications are due July 31 for the first cycle of funding from PCORI for Comparative Clinical Effectiveness Research, with later deadlines for subsequent cycles. PCORI released its first primary research funding announcements in which they will award \$120 million this year for innovative projects that incorporate patients and stakeholders in research teams and address the areas of focus of PCORI's National Priorities for Research and Research Agenda. Priority funding areas include:

Assessment of Prevention, Diagnosis, and Treatment Options – for projects that

address critical decisions that patients, their caregivers and clinicians face with too little information

Improving Healthcare Systems – for projects that address critical decisions that face health care systems, the patients and caregivers who rely on them, and the clinicians who work within them

Communication and Dissemination Research – for projects that address critical elements in the communication and dissemination process among patients, their caregivers and clinicians

Addressing Disparities – for projects that will inform the choice of strategies to eliminate disparities

Accelerating Patient-Centered Outcomes Research and Methodological Research – forthcoming Summer 2012.

More information on the four PCORI Funding Announcements (PFAs) can be found at the PCORI [website](#). All application materials can be downloaded from the Funding Opportunities section of PCORI's website

NIH Research to Action Grant Opportunity

Standard Deadlines Apply

Expiration Date: September 8, 2015

Submissions are now open for NIEHS R01 grants for "Research to Action: Assessing and Addressing Community Exposure to Environmental Contaminants." Applicants will use community-engaged research to investigate potential health risks of environmental exposures and to implement an action plan based on research findings.

Children's Environmental Health Research Centers PO1 Grant Opportunity

Letter of Intent Due Date: June 17, 2012

Application Deadline: July 17, 2012

The NIEHS and EPA NCER announced a funding opportunity for a transdisciplinary program that examines effects of environmental factors on children's health. The program encourages strong links between disciplines in the basic, applied, clinical, and public health sciences.

NIH: Rapid Assessment Post-Impact of Disaster (R21)  *Expiration Date:*

October 4, 2015

NIH: Food Protection Rapid Response Team (U18)  *Expiration Date:*

July 7, 2012

NNPHI Call for Proposals: States without an NNHPI member

Letter of Intent Due Date: June 6, 2012 ☐ *Proposal Deadline: June 25, 2012*

Public health institutes (PHIs) are nonprofits that improve the public's health by fostering innovation, leveraging resources, and building partnerships across sectors. This recently announced funding opportunity from NNPHI seeks to enhance the performance of the public health system by supporting additional states in finding ways to use the PHI model to help address pressing health challenges.

☐ **Other Listings** ☐☐ **PBRN Quick Strike Research Projects** ☐ The Public Health PBRN Coordinating Center will solicit, select, and coordinate the implementation of up to four Quick Strike Research Fund (QSRF) research projects to be carried out by primary and affiliate members of the Public Health PBRN Program during the 2011-2012 program year. Projects must address time-sensitive research questions based on emerging information needs in public health practice and policy; must have a high probability of leading to subsequent, larger-scale studies; and must be feasible for completion with a limited budget of up to \$25,000 in total costs and within 3-6 months. These projects will be funded through a subcontract to each awardee to expedite initiation of the research. Grantees will be expected to disseminate practice-relevant findings rapidly through the new rapid-release publication *Frontiers in Public Health Services and Systems Research* and other vehicles, and will be expected translate findings into practice improvements through the development of webinars, training sessions, and decision tools for use by practitioners and policy analysts.

Proposals will be accepted on a rolling basis until all awards have been given or until a final deadline of August 31 2012 has been reached. PBRN networks should submit a brief proposal of no more than four single-paged pages (one-inch margins, 11 point Arial font) by emailing their proposal as an attachment in PDF format to publichealthPBRN@uky.edu with "QSRF Proposal" indicated in the subject line. The proposal must include: (A) a description of the rationale and specific aims for the proposed project; (B) a summary of the research design, data and analytic methods to be used; (C) a description of the practice settings involved in the research and how they will be engaged in the design, implementation, and translation of the research; and (D) a brief summary of the roles and qualifications

of key personnel. Proposals will be reviewed by Coordinating Center staff and members of the Public Health PBRN National Advisory Committee (NAC) using the following selection criteria: (1) the importance of the topic in terms of its ability to inform public health practice and/or policy; (2) time-sensitivity of the research opportunity; (3) feasibility of the project given budget and time constraints and expertise of network; (4) strength of mechanisms for engaging practice settings in the study and its translation; and (5) potential for the study to lead to subsequent, larger-scale funded research. Additionally, for PBRN networks that have received prior QSRF awards, reviewers will consider the past performance of the network in publishing and disseminating results from prior QSRF projects and in pursuing subsequent larger-scale studies. Based on the proposal reviews, successful applicants will be asked to submit a project budget and additional materials required for award processing.

Healthy Eating Research: Building Evidence to Prevent Childhood Obesity is a national program of the Robert Wood Johnson Foundation (RWJF). The program supports research on environmental and policy strategies with strong potential to promote healthy eating among children to prevent childhood obesity, especially among lower-income and racial and ethnic populations at highest risk for obesity. Findings are expected to advance RWJF's efforts to reverse the childhood obesity epidemic by 2015. More information is available [here](#).

Grants Admin Corner

Remember to Route All Questions on Grant Budgeting, Reporting, and Administration to the PH PBRN Coordinating Center: The PH PBRN National Coordinating Center is your one-stop source for information and assistance on the administrative aspects of your Public Health PBRN grants, including budgeting, expenditures, subcontracts, and reporting. Please make sure that you send your network's questions to the Coordinating Center (email publichealthPBRN@uky.edu or telephone **(859) 218-2094**) to ensure the fastest response. All requests for no-cost extensions, budget modifications, and other changes regarding your network's Robert Wood Johnson Foundation Public Health PBRN grants must be submitted to and reviewed by the PH PBRN National Coordinating Center before they can be considered by the Foundation.

Remember to Route all PBRN Grant Reports and Products to the Coordinating Center and the Foundation: Your network's narrative and financial reports should be submitted electronically to the Public Health PBRN National Coordinating Center and to the Robert Wood Johnson Foundation following the Foundation's reporting guidelines. All products from your network should be submitted electronically as well, as soon as they are completed. Remember to follow these reporting guidelines:

RWJF guidelines for annual and final narrative reports & bibliography:
http://www.rwjf.org/files/publications/RWJF_GranteeReportingInstructions.pdf

RWJF guidelines for financial reports:
http://www.rwjf.org/files/publications/RWJF_FinancialGuidelinesReporting.pdf

RWJF guidelines for electronic submission of grant products and reports
www.rwjf.org/files/publications/RWJF_ElectronicSubmissions.pdf

Key Dates

Academy Health Annual Research Meeting. Orlando, FL, June 24-26. [More](#) information.

NACCHO Annual Meeting. Los Angeles, CA, July 11-13. [More](#) information.

APHA Annual Meeting. San Francisco, October 27-31. [More](#) information.

Public Health Law Conference. Atlanta, GA, October 10-12. [More](#) information.

