



Issue #96

## PBRN Week in Review | November 7 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@uky.edu](mailto:publichealthpbrn@uky.edu) or (859) 218-2094. Past issues are available in the [newsletter](#) archive.

### Notable PBRN Activities

- **Coordinating Center Transition to Kentucky is Complete.** The Public Health PBRN Coordinating Center has completed its transition to the University of Kentucky. Please make sure to use the email address [PublicHealthPBRN@uky.edu](mailto:PublicHealthPBRN@uky.edu) and the telephone number **(859) 218-2094** to reach Coordinating Center staff and to send along your questions, comments, requests, ideas, updates, and products. UAMS-based program staff completed their activities under the PBRN Coordinating Center on October 31. All inquiries and correspondence regarding PBRN grants, sub-awards, and related project activities should be directed through the above communication channels at the University of Kentucky.
- **New Opportunity for Multi-PBRN Research.** This past week the Robert Wood Johnson Foundation released a Request for Proposals (RFP) inviting PBRNs to participate in a multi-network study of practice variation in public health. The *Multi-network Practices and Outcomes Variation Study (MPROVE)* will allow participating PBRN networks to use a common research protocol and standardized data collection strategies to examine the causes and consequences of practice variation in public health. This opportunity, which is limited to primary and affiliate networks of the RWJF Public Health PBRN Program, will support up to 6 participating networks with grants of \$50,000 each to support data collection and analysis activities. **An email notification with instructions on how to access the RFP and how to apply for the program was sent to the primary contact person at each PBRN on Wednesday November 2, and a conference call to discuss the RFP is scheduled for Monday November 7 at 3pm EST** (Conference Call Line: 877-394-0659, Conference ID: 7129451782#). For more information, contact the [PBRN Coordinating Center](#).
- **PBRN Research Permeates the 2011 APHA Annual Meeting.** More than 15 scientific presentations and two APHA Learning Institutes featured the work of the Public Health PBRNs at this past week's APHA Annual Meeting in Washington DC. Among the topics examined in these sessions were: determinants of local variation in the implementation of smoke-free laws in Ohio, factors that drive interest in regional approaches to public health service delivery in Massachusetts, and techniques used for chronic disease quality improvement in local public health settings in Kentucky. (A full list of presentations can be found in last week's newsletter). PBRN leaders and collaborators also found time for some informal networking and socializing on Sunday evening. APHA presenters – please make sure to send a final copy of your presentation to the [PBRN Coordinating Center](#) so this material can be archived on the website for those who were not able to attend APHA.

- **Dental Researchers Examine Approaches to Disparities Research through PHSSR and PBRNs.** The American Association for Dental Research (AADR) held their annual [Fall Focused Symposium](#) in Washington this past Thursday and Friday, which was dedicated to the topic of health disparities research. The Coordinating Center's Glen Mays spoke to the association about how public health delivery systems both contribute to and intervene on oral health disparities, using as an example the large geographic and rural/urban differences in the availability of oral health programs among the nation's local public health agencies. Mays noted the importance of PHSSR studies in elucidating new roles that can be played by public health systems in closing health disparities, including research underway by the Public Health PBRNs (see for example the new RACE studies featured in last week's newsletter and below). Dialogue with officials at the National Institute for Dental and Craniofacial Research and the National Institute for Minority Health and Health Disparities during a panel session highlighted ways in which dental researchers and Public Health PBRNs could engage in collaborative research to test system-level interventions for closing disparities in oral health. Collaboration between RWJF's Public Health PBRNs and the four NIDCR-funded [Dental PBRNs](#) appears particularly promising. As your PBRN expands, you may wish to consider ways of engaging oral health and public health dentistry practitioners in your research activities, and opportunities for pursuing expanded research funding through agencies such as NIDCR and NIMHHD. Contact the [PBRN Coordinating Center](#) if you are interested in participating in further conversations regarding collaborative research in oral health and dental PBRNs.
  
- **Electronic Clinical Data Offer New Opportunities for PHSSR:** Expanded use of electronic health records and health information exchanges are creating new data sources that can be used for research on health services and delivery systems – including opportunities for PHSSR. The U.S. Agency for Healthcare Quality and Research (AHRQ) has funded a variety of initiatives to harness these new data sources for comparative effectiveness research, and recently it tasked AcademyHealth with convening these grantees for the purposes of exploring cross-cutting research opportunities and novel methodologies for use with electronic clinical data sources. The Coordinating Center's Glen Mays spoke to a symposium convened by the [Electronic Data Methods \(EDM\) Forum](#) last week about opportunities and methods for using electronic clinical data to support studies of community-level and system-level interventions, including studies of public health strategies and systems of the type commonly of interest to PHSSR scholars and public health PBRNs. The symposium surfaced a number of research questions and methodological interests held in common by PHSSR scholars, public health practitioners, and stakeholders of electronic clinical data systems. Following the symposium, AcademyHealth will be examining opportunities for further exploration of the PHSSR opportunities presented by electronic clinical data systems. Contact the [PBRN Coordinating Center](#) if you are interested in participating in further conversations regarding EDM research opportunities and PHSSR.
  
- **New Dissemination Opportunity for PHSSR:** An upcoming issue of the *Journal of Public Health Management and Practice* will be dedicated to advances in PHSSR, with a special focus on approaches for translating findings to policy and practice audiences. The issue, tentatively titled, "The Science of Public Health Practice: Advances in PHSSR" is being guest-edited by the PBRN Coordinating Center's Glen Mays and the National Coordinating Center for PHSSR's Doug Scutchfield. Manuscripts will be due in February 2012, with a final publication date of November 2012 to be released in conjunction with next year's APHA Annual Meeting. More information will be forthcoming, but in the meantime you may contact the [PBRN Coordinating Center](#) with questions.

- **Opportunities for Research Related to the HHS Public Health Quality Framework.** The Coordinating Center's Glen Mays began a dialogue recently with Dr. Peggy Honoré and staff at the Office of the Assistant Secretary for Health at the U.S. Department of Health and Human Services concerning next steps in the development and operationalization of the HHS *Framework for Quality in the Public Health System*. The Framework and a related set of priority areas for quality improvement were developed by a federal forum convened by Dr. Honoré in 2008, and was the subject of a recent article in [Health Affairs](#) by Honoré, Assistant Secretary of Health Dr. Howard Koh, CMS Administrator Don Berwick, and other federal officials. Logical next steps in this initiative include the development, validation, and implementation of a set of metrics that can be used to identify gaps in quality across the public health system, to study the causes and consequences of variation in quality across the system, and to evaluate the effectiveness of quality improvement strategies. Public Health PBRNs are positioned to play important roles in these types of activities. Dr. Honoré and Mays will be developing plans and strategies for moving this effort forward in the coming weeks, so contact the [Coordinating Center](#) if your network has interests and ideas related to this effort.
  
- **Final Push on PBRN Network Analysis Survey:** The Coordinating Center is in the final stages of fielding network analysis survey of participants in the Round II and affiliate public health PBRNs. This survey allows us to obtain a snapshot of patterns of interaction between researchers and practitioners in the PBRNs, and will help us better understand – and ultimately improve – how the networks function as mechanisms for producing and translating evidence for practice. This survey will replicate the survey completed with Round I PBRNs in 2010. As a learning organization, the Public Health PBRN Program occasionally must focus the research lens on ourselves to take full advantage of opportunities to produce useful evidence. If you are a Round II or affiliate PBRN, please encourage all of the participants and collaborators in your network to respond to the survey at their earliest convenience. Data and findings will be shared with each participating network to stimulate further analysis, interpretation, and brainstorming of ways to improve research production and translation processes. Contact with [PBRN Coordinating Center](#) with any needs or questions related to the survey. ***We are attempting to complete survey data collection by Friday November 11, so please encourage your members to respond by that date.***
  
- **New PBRN Dissemination Opportunity: the Public Health REACT Podcast:** As more PBRN research projects are bearing fruit, the Public Health PBRN Program is developing a new vehicle for rapidly disseminating key findings and practice implications from this research to key audiences, tentatively called the ***Public Health Research-to-Action (REACT) Podcast***. Through this vehicle, the program will produce a series of fast and timely podcast interviews with PBRN networks as they are completing research projects, focusing squarely on the implications of the research for public health practice and policy decisions. NAC member and Arkansas secretary of health Dr. Paul Halverson has agreed to host this series of approximately 3-minute conversations with PBRN leaders about their research projects. Dr. Halverson will serve as an interviewer and provocateur for these sessions, driven by a few targeted questions asked by a sitting state health official. With Dr. Halverson leading the conversation, we can be sure that these sessions will emphasize brevity, clarity, and relevance to real-world public health practice and policy, particularly at state and local levels. We will disseminate the podcasts through a variety of channels, including the PBRN website, the PHSSR Youtube channel, and partnerships with key public health professional organizations. We will be contacting PBRN leaders about this opportunity in the coming weeks, but don't hesitate to contact the [Coordinating Center](#) with your ideas about this opportunity.

- **Research on NACCHO Model Practices:** Leaders from Public Health PBRNs convened by conference call recently 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 also 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 [Coordinating Center](#).
- **End of Project Year Updates and Reporting:** The Coordinating Center completed its program year on October 31 and is compiling reports on the status of all PBRN research activities. Please make sure that your network has submitted any research products completed during the year via email to the [Coordinating Center](#) (manuscripts, briefs, reports, presentations, instruments, data sets, guidelines, decision aides) and also make sure to submit these to the RWJF following its submission guidelines. We will be in contact with each network this month to make sure we have the latest updates on the status of your network’s projects.
- **RACE Supplemental Awards for PBRN Research Begin:** Eight public health PBRNs are starting up new research activities related to health disparities and/or methodological advances in public health services & systems research through the PBRN *Research Acceleration and Capacity Expansion (RACE)* Supplemental Awards Series. A thumbnail sketch of the new projects include:
  - **Variation in Local Public Health Actions to Address Health Inequities.** This project of the Minnesota PBRN seeks to investigate the extent to which local health departments in Minnesota engage in activities to reduce health inequities, and to identify the characteristics of local public health systems that facilitate and impede these activities.
  - **Utilization and Effectiveness of a Health Equity Index in Mobilizing Local Public Health Action.** The Connecticut PBRN will refine and expand a methodology developed by the Connecticut Association of Directors of Health (CADH) to construct a health equity index that measures social and economic determinants of health at the neighborhood level, and to investigate the use of this index by local public health officials to mobilize multi-sector disparity reduction activities.
  - **Effects of Cultural Competency Training on Local Health Departments: A Randomized Trial.** This project through the Kentucky PBRN will analyze variation in the cultural and linguistic competence of local health departments within Kentucky, adapt and test a series of training modules designed to strengthen cultural and linguistic competence among staff, and evaluate the effectiveness of these training models.
  - **Local Health Department Workforce Reductions: Implications for Diversity and Health Disparities.** This project by the Washington PBRN seeks to quantify the variation in workforce reductions made by local health departments in Washington state in response to the economic downturn, and to estimate the effects of these reductions on local health department service delivery, workforce diversity, and capacity to address health disparities.
  - **Comparative Effectiveness of State vs. Regional Approaches to QI in Public Health.** The Georgia PBRN will examine the impact of a quality improvement collaborative model

implemented through Georgia's regional public health districts on the implementation and effectiveness of local public health QI activities.

- **Regional Public Health Structures and Readiness for Accreditation and QI.** The Nebraska PBRN will make use of the state's recently developed regional public health structures to assess and compare readiness for accreditation among regional health departments and single-county health departments within the state, and to examine the utility of quality improvement (QI) strategies implemented by health departments in preparing agencies for accreditation.
- **Incorporating Comparative Effectiveness Research Tools into Public Health PBRN Research.** This supplement will enhance the methodological capabilities of the North Carolina PBRN by incorporating novel comparative effectiveness research (CER) analytics based on propensity score estimation into an ongoing study that examines the consequences of a recent reduction of Medicaid reimbursement funding to local health departments for delivery of evidence-based maternity support services to low-income women and their children.
- **Enhanced Direct Observation Methods for Studying Foodborne Outbreak Practices in Ohio.** The supplement builds on the Ohio PBRN's ongoing study that uses direct observation methods to assess practice variation in food-borne outbreak (FBO) investigation and response among local health departments in Ohio. The supplement will allow for the incorporation of consumer perceptions of prevention, investigation and management practices along with enhanced analytic methods for studying drivers and correlates of practice variation.

More details on these new projects will be released soon.

## Related Developments in Research and Practice

- **New Indicator Set for Monitoring Health Improvement:** U.S. Assistant Secretary of Health Dr. Howard Koh released the [\*Healthy People 2020 Leading Health Indicators\*](#) last week at the APHA Annual Meeting, which will be used to track changes in the nation's health and health systems over the next decade. The set of 26 indicators in 12 domains include familiar as well as new metrics, and are likely to be of keen interest to scholars in PHSSR who seek to connect their research to the nation's prevention and health improvement agenda.
- **Federal Agencies Commission Studies on Public Health Spending:** Two studies have been commissioned by the federal government in recent weeks to examine issues related to the financing of public health activities in the U.S. One of these studies was requested by Congress and is being conducted by the U.S. Government Accountability Office (GAO), while the other has been commissioned by the U.S. Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation (ASPE). Both studies are seeking to review empirical literature, data, and related evidence concerning financing mechanisms and spending patterns for public health activities in the U.S., and the health and economic effects of these investments (in short: who pays, how much, for what, through what financing mechanisms, how do these patterns vary across the U.S. and change over time, and what are their health and economic effects). These two federal initiatives create an excellent opportunity for disseminating and translating findings from relevant public health PBRN studies to U.S. policy officials. The Coordinating Center is working with both federal agencies to provide relevant information. If your PBRN has new research findings,

reports, briefs, or presentations related to public health financing and spending patterns, please make sure the [Coordinating Center](#) is aware of these products.

- **New CMMI Innovation Advisors Program:** The U.S. Department of Health and Human Services, acting through the CMS Center for Medicare and Medicaid Innovation, announced a new program to spur transformations within the nation's health system by supporting individuals who can develop, test, and evaluate new models of service delivery. According to the announcement, "The Innovation Advisors Program will inspire dedicated, skilled individuals in the health care system to deepen several key skill sets, including: Health care economics and finance; **Population health; Systems analysis;** and Operations research. These individuals will: Support the Innovation Center in testing new models of care delivery; Utilize their knowledge and skills in their home organization or area in pursuit of the three-part aim of improving health, improving care, and lowering costs through continuous improvement; **Work with other local organizations or groups in driving delivery system reform;** Develop new ideas or innovations for possible testing of diffusion by the Innovation Center; and Build durable skill in system improvement throughout their area or region. The deadline to submit applications is November 15, 2011. Applications for the Innovation Advisors Program can be accessed at <http://orise.orau.gov/IAP/>. Leaders within public health PBRNs may be well positioned to use this program for supporting the development and testing of models for integrating public health strategies into local health care settings.

### Activities on the Horizon

- **PH PBRN November Conference Call.** The Public Health PBRN Monthly Conference Call will be on Thursday, November 17 from 1:00 to 2:30 p.m. ET. As part of the PBRN Research-in-Progress section, representatives of the Nebraska Public Health PBRN will present emerging findings from their work examining QI activities and readiness for accreditation in single-county and regional multi-county public health jurisdictions.
- **Special Webinar on the Public Health Activities and Services Tracking Study (PHAST): Opportunities for PBRN Research.** The Coordinating Center is working with the Washington Public Health PBRN to schedule a special webinar this month to review the data resources being compiled through the PHAST study and the opportunities for using these resources for PBRN research. ***Stay tuned for an exact date and time for this special webinar.***

### Research Dissemination Opportunities

- **NIH D&I Conference Call for Proposals.** The 4<sup>th</sup> 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](#). The Public Health PBRN program presented a panel at last year's meeting on work of the PBRNs that was quite popular. **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

### REPORTS, BRIEFS AND PUBLICATIONS

- **Producing Practice-Oriented and Action-Oriented Public Health Research:** A new editorial in this month's [AJPH](#) by colleagues from the NYC Department of Health describes approaches for producing more relevant and actionable evidence for the public health practice community. The authors touch on many of the “pragmatic” research approaches currently being used in public health PBRNs, including “observational studies, the use of surveillance data for evaluation, and predictive mathematical modeling.” Bravo, Big Apple colleagues.
- **Implementation and Tailoring of Obesity Prevention in WIC Clinics:** A new process evaluation by colleagues from the NY State Department of Health examines the experience of local WIC agencies in adopting and implementing a childhood obesity prevention program. The study found a high degree of fidelity in adoption, but also evidence that WIC agencies tailored implementation to client needs and local resource availability. The study appears in online first format in the journal [Health Education Research](#).
- **Washington and Oregon Health Officials Examine Changes in Public Health Practice:** In a new commentary in this week's [MMWR](#), Seattle-King County health official Dr. David Fleming (also Washington PBRN member) and Dr. Melvin Kohn of Oregon Health Authority examine notable changes in state and local public health practice over the past 50 years since the first MMWR report was released. The commentary touches on many of the trends and issues that are currently under study by public health PBRNs, including changes in finance, organization, workforce, and the content of practice. The 50<sup>th</sup> anniversary of MMWR also reminds us that this publication is an excellent vehicle for rapidly disseminating key findings from PBRN research to practitioners and public health policy officials across the U.S.
- **New Experimental Evidence that Neighborhood SES Affects Health:** In this week's [NEJM](#), researchers used a long-term follow-up survey of participants in HUD's innovative Moving to Opportunity randomized trial to test the causal effects of neighborhood SES characteristics on health. In the original trial, low-income participants eligible for housing assistance were randomized to usual practice or to an arm that provided housing vouchers only if the participant agreed to move to a low-poverty neighborhood. According to the authors, “The opportunity to move from a neighborhood with a high level of poverty to one with a lower level of poverty was associated with modest but potentially important reductions in the prevalence of extreme obesity and diabetes. The mechanisms underlying these associations remain unclear but warrant further investigation.”

### CONFERENCES

- **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](#).

## Funding Opportunities and Announcements

The NCC maintains a [list of funding opportunities](#) of interest to its networks. Grant opportunities with recurring deadlines are tracked and updated.

### NEW LISTINGS

- **New CMMI Innovation Advisors Program:** See information above about the new CMS funding opportunity for innovation advisors. Deadline November 15, 2011.
- **Quality Improvement in Public Health Practice Exchange.** RWJF is seeking an organization to build and operate an expanding web-based database of QI efforts conducted by governmental public health departments across the country, to help users find QI interventions and tools relevant to their own health department and community needs, and to provide a forum for dialogue and learning about QI in public health. More [here](#). Application Deadline: November 9, 2011 5:00 PM EST
- **PCORI Pilots.** In an August newsletter, we mentioned that the [Patient-Centered Outcomes Research Institute](#) (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 [Pilot Projects Grant Program](#) 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.
- **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
- **NIH Common Fund: Economic 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.
- **NIH Systems Science and Health Research.** Proposals are being solicited from multiple NIH institutes for R01 behavioral and social science research projects, both basic and applied, that use methods of systems science (e.g. network analysis, agent-based modeling, etc) to understand complex processes that affect human health. Includes an interest in studies that elucidate the relationships between health service delivery processes and health outcomes across the entire system of care, multi-level effects of health promotion and disease prevention interventions, and mechanisms underlying health disparities. Details available in the [FOA](#) and standard application dates for R01s apply.



## PREVIOUSLY ANNOUNCED LISTINGS

- **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), [AHRO'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 [CFP](#).

## Key Dates

<b>Nov 7</b>	Conference Call on PBRN RFP for Multi-Network Research, 3pm EST (Conference Call Line: 877-394-0659, Conference ID: 7129451782#)
<b>TBD</b>	<b>Special PBRN Webinar: Update on PHAST: Opportunities for PBRNs</b> (access information forthcoming)
<b>Nov 17</b>	<b>Monthly PBRN Conference   1:00-2:30 p.m. ET (NE PH PBRN)</b>
<b>Dec 15</b>	<b>Monthly PBRN Conference   1:00-2:30 p.m. ET (NC PH PBRN)</b>
<b>April 17-19</b>	PHSSR Keeneland Conference 2012, Lexington

