

PHSSR InsideTrack- December 2012

PERSPECTIVES IN PHSSR



Paul Erwin, M.D., Dr.P.H., Co-principal Investigator, [National Coordinating Center for Public Health Services and Systems Research](#), and head of the [Department of Public Health at the University of Tennessee](#) in Knoxville

In the November issue of *InsideTrack*, [Dr. Ross Brownson](#) wrote about the efforts to improve and expand evidence-based public health practice. Dr.

Brownson and colleagues at [Washington University](#)

(St. Louis) and [St. Louis University](#) have been at the forefront of working with public health practitioners to build the *skills* for [Evidence-Based Public Health](#) (EBPH) through their EBPH trainings for more than a decade. These short courses (three-five days) are structured around a planning framework that includes modules on conducting a community assessment, collecting and analyzing quantitative data, searching the literature, developing and prioritizing options, developing an action plan, and conducting evaluations (including economic evaluations). Almost a "mini-MPH," these courses have been adapted by several states through the generosity of the Brownson team, but have been primarily geared for state-level governmental public health staff. As a part of Dr. Brownson's [Robert Wood Johnson Foundation](#)-funded [LEAD-Public Health Project](#) (Local Evidence for Affecting Decisions about Public Health), four states (Ohio, Michigan, North Carolina and Washington) will be further adapting the EBPH training for use with local health department (LHD) staff, which will provide opportunities for collaboration among those states' [Prevention Research Centers](#), [Public Health Training Centers](#)

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ABOUT PHSSR - The emerging field of public health services and systems

research (PHSSR) examines questions that relate to the financing, organization and delivery of public health services - and how those factors translate to population health.

states [Prevention Research Centers](#), [Public Health Training Centers](#), and [Public Health Practice-Based Research Networks](#). A one and a half day “train-the-trainer” session was held in late November for the lead personnel from these four states, with plans for the four states to provide the full EBPH training in late spring 2013.

Why would busy LHD staff want to spend three-four days in EBPH training? We think there are at least four incentives for doing so, as participation in EBPH training can help:

1. Build competencies for agency accreditation – EBPH training connects to most of the accreditation domains, but can particularly strengthen capacities to address domains 8 (maintaining a competent public health workforce), 9 (evaluation), and 10 (contribute to and apply the evidence of public health).
2. Provide the basis for stating the value of local public health – The fallout from the economic crisis has been a major loss in the public health workforce and programs. Acquiring, and then being able to use the tools to define the economic value of public health – the proverbial “return on investment” – has become an increasingly important part of the LHD Director’s toolkit.
3. Identify opportunities to improve efficiency – LHDs are constantly struggling with having to do more with less, and inefficiencies in programmatic operations double the pain still felt from the economic crisis. EBPH training, though, is not just about adopting best business practices – it also is about refining public health practices, on the basis of evidence, within a socioecological model of health.
4. Strengthen the capacity of LHDs to improve the public’s health – What LHD Director wouldn’t jump at the chance to understand and apply the basic formulations “if you do X, you will not move the needle on population health, and in fact you may do more harm than good,” but “if you do Y you may improve programmatic operations in a way that not only improves the public’s health, but also removes any lingering concern about X.” In addition, because EBPH training includes a systematic method for finding and evaluating evidence, practitioners can use these skills in grant writing, increasing the potential for external funding support to scale-up Y.

Having the *skills* to identify and use EBPH, though, is just one part of a complicated equation. As has been pointed out in these pages repeatedly, the relative paucity of EBPH is a first challenge; although evidence is increasing we still fall short of having high-level evidence for much of what occurs on a day-to-day basis in a LHD. There are many reasons for this, and, in an upcoming *InsideTrack*, we’ll address just one of those: Evidence cannot be built when the research is not

translatable.

Research

Keeneland Conference 2013

Register, Submit Abstracts and Apply for a Scholarship

Abstract submission and registration are open for the [2013 Keeneland Conference](#), a premier national meeting that brings together researchers, practitioners and policy-makers interested in PHSSR. The 2013 conference is scheduled for April 8-11 in Lexington, Ky. The deadline for abstract submissions is Jan. 7, 2013. Find out more [here](#) about how to register and how to submit your abstract.

In recognition of the many lasting contributions of [Dr. E. Richard "Rick" Brown](#), distinguished leader, scholar and teacher in public health and the founding director of the [UCLA Center for Health Policy Research](#), the National Coordinating Center for Public Health Services and Systems Research (PHSSR) has established three annual Keeneland Conference scholarships. These scholarships recognize Dr. Brown's role in PHSSR and his participation in the Keeneland Conference, and will offset the expense of attending the conference. [Click here](#) to apply.

JPHMP Issue on PHSSR Available Online

The November/December issue of the [Journal of Public Health Management and Practice](#) is now available online. The issue highlights important new findings from the field and the pathways that these studies reveal for improving the organization, financing and delivery of public health services.

Many of the studies featured in this issue were conducted through the [Robert Wood Johnson Foundation's Public Health Practice-Based Research Networks \(PBRN\)](#) Program, which brings researchers and practitioners together for real-world studies that can guide policy and improve public health delivery. For more information about the breadth of research included in this issue of JPHMP, check out the [table of contents](#).

NNPHI Grantees Complete RWJF-Funded Research

In 2010, the Robert Wood Johnson Foundation (RWJF) funded seven [National Network for Public Health Institutes](#) (NNPHI)-managed PHSSR grants to build evidence on how to improve the structure and performance of the public health system. The remaining four [grantees](#) from this first NNPHI-managed PHSSR solicitation have now completed their research projects:

- The University of California, Berkeley, determined the return on investment from public health activities within California and for the Alameda County Department of Public Health, taking into account variations among racial/ethnic groups.
- The University of Alabama at Birmingham identified and addressed factors affecting interagency collaboration for the maternal and child health population within state and local agencies and the Indian Health Care System.
- The University of California, Los Angeles, examined how local health department organizational structure and financing affect chronic disease and injury outcomes of older adults.
- The University of Wisconsin investigated how reducing tobacco control funding affects the public's health.

NNPHI is working with the NCC and other partners in PHSSR to help support the translation and dissemination of findings.

Call for Session Proposals for Public Health Research Track at NACCHO Annual Conference

The call for session proposals for the Public Health Research Track at the [2013 NACCHO Annual Conference](#) in Dallas (July 10-12) is now open and will close Dec. 19. The NACCHO Annual Conference is the year's largest gathering of local health department leaders and staff and provides a unique opportunity for connecting researchers and practitioners. The public health research track gives researchers an opportunity to influence the practice of public health and helps public health practitioners to learn from the research experiences of others and to apply what they learn to their own practice. If your research or that of your colleagues is ready for translation to practice, please submit a session proposal. The online abstract submission system is [available here](#). Please contact Carolyn Leep (cleep@naccho.org) with any questions about the Public Health Research Track.

Call for Papers and Panels Released for AcademyHealth PHSR Interest Group Meeting

AcademyHealth's Public Health Systems Research Interest Group has released its [Call for Papers and Panels](#). Selected research will be presented at the PHSR IG Annual Meeting June 25-26, 2013, in Baltimore, Md. This meeting follows AcademyHealth's [Annual Research Meeting](#). (Abstracts must be submitted separately to be considered for both meetings.)

AcademyHealth Welcomes Participation in HSR Information Sciences Community

AcademyHealth is pleased to invite you to participate in the [Health Services Research \(HSR\) Information Sciences Community](#), an online community of librarians, information scientists, and health services

community for librarians, information scientists, and health services researchers interested in engaging with, and learning from, one another. This new virtual network is free and may be accessed through my.academyhealth.org.

The Community will provide you the opportunity to:

- Participate in timely discussions, or seek answers to "just in time" questions relevant to the field;
- Post announcements on new or useful resources, upcoming events, etc.;
- Access a library of relevant links and publications provided by the community;
- Link to current activities, resources, and services of the [National Information Center on Health Services Research and Health Care Technology \(NICHSR\)](#) at the [National Library of Medicine \(NLM\)](#).

Participating in the Community is free for both AcademyHealth members and non-members, but first you must register. Email HSRProj@AcademyHealth.org to get your free login information.

This community has been developed as part of the Health Services Research Projects in Progress (HSRProj) program. HSRProj is a resource funded by the National Library of Medicine and maintained by AcademyHealth and the Cecil G. Sheps Center for Health Services Research at the University of North Carolina, Chapel Hill.

AcademyHealth Offers Reference Guide to Preparing Work for Peer-Review Publication

With the support of the [Office of the National Coordinator for Health IT](#) and the [Commonwealth Fund](#), AcademyHealth has developed a reference guide to help prepare quality work according to standards appropriate for peer-review publication. The purpose of this resource is to provide a broad overview of the peer-review writing process; guidelines for developing an article; considerations for choosing a journal and submitting the article; links to several other resources for journal authors; and helpful tips and best practices for team members with or without peer-review writing experience. For more information, and to access the document, [click here](#) or contact Abigail.Schachter@AcademyHealth.org.

New Book on Contemporary Public Health Features the Work of PHSSR and PBRN Leaders

In a comprehensive new volume published by [University Press of Kentucky](#), editor [Dr. James W. Holsinger Jr.](#), the Charles T. Wethington Jr. Chair in the Health Sciences at the University of Kentucky, and a diverse group of scholars and practitioners offer a concise overview of the rapidly evolving field of public health, emphasizing that the need

the rapidly evolving field of public health, emphasizing that the need for effective prevention delivery systems and strategies has never been greater. [Contemporary Public Health: Principles, Practice, and Policy](#) includes chapters authored by several prominent experts in the field and is dedicated in recognition of the many accomplishments of [Dr. F. Douglas Scutchfield](#), director of the [National Coordinating Center for PHSSR](#). Learn more [here](#).

Learn About Social Networking Analysis (SNA) Through New Online Training

A new [online training](#) is designed to provide information on social networking analysis (SNA), which yields vital information critical to building and maintaining resilient communities that have the propensity to disburse credible information efficiently and effectively. At first glance, SNA is intimidating, discouraging most front line leaders and managers from using this powerful, predictive and practical management tool. Learn about SNA through the new [Online Learning Modules](#), a dynamic and interactive program designed to align theory, research and practice.

CDC *Preventing Chronic Disease* Journal Accepting Submissions for 2012 Student Research Paper Contest

Deadline: Jan. 23, 2013

[Preventing Chronic Disease](#) (*PCD*) announces its 2013 Student Research Paper Contest. *PCD* is looking for graduate and undergraduate students to submit papers relevant to the prevention, screening, surveillance, and/or population-based intervention of chronic diseases, including but not limited to arthritis, asthma, cancer, depression, diabetes, obesity, and cardiovascular disease. A peer-reviewed electronic journal, *PCD* was established to provide a forum for researchers and practitioners in chronic disease prevention and health promotion. The journal is published weekly by the [Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion](#). The winning manuscript will be recognized on the *PCD* website and will be published in a 2013 *PCD* release. Papers must be received electronically no later than 5 p.m. EST on Jan. 23, 2013. For more information on the contest and how to submit your manuscript, visit [PCD Student Research Contest](#).

Online Training for Measuring the Built Environment for Physical Activity and Nutrition

The [Built Environment Assessment Training Institute](#) (BEAT) at the University of Pennsylvania School of Medicine offers online training modules for assessing physical activity and nutrition environments – measures that are becoming widely used in public health research, surveillance, assessment, and evaluation initiatives. The courses are geared towards researchers, practitioners and anyone else with an

interest in learning how to conduct audits of the built environment.
For more information, click [here](#).

Emergency Preparedness and Community Coalitions: Opportunities and Challenges

While hospitals and first responders consistently work together to prepare for natural disasters, infectious disease outbreaks and other emergencies likely to result in many injured or ill people, other important groups — primary care clinicians and nursing homes, for example — typically do not participate in local emergency-preparedness coalitions, according to a new qualitative study of 10 U.S. communities by the [Center for Studying Health System Change](#) (HSC).

Emergency preparedness requires coordination of diverse entities at the local, regional and national levels. Community-based coalitions are intended to foster local preparedness and minimize the need for federal intervention, according to the study funded by the [U.S. Centers for Disease Control and Prevention](#).

For more information, read the [research brief](#) and the [news release](#).

Recently Published Research

[From service provision to function based performance - perspectives on public health systems from the USA and Israel](#)

Scutchfield FD, Miron E, Ingram RC.

Isr J Health Policy Res. 2012 Nov 26;1(1):46. [Epub ahead of print]

DOI: 10.1186/2045-4015-1-46

PMID: [23181452](#)

[Neighborhood disparities in access to healthy foods and their effects on environmental justice.](#)

Hilmers A, Hilmers DC, Dave J.

Am J Public Health. 2012 Sep;102(9):1644-54.

DOI: 10.2105/AJPH.2012.300865. Epub 2012 Jul 19. Review.

PMID: [22813465](#)

[A functional public health surveillance system.](#)

Kass-Hout TA, Gallagher K, Foldy S, Buehler JW.

Am J Public Health. 2012 Sep;102(9):e1-2

PMID: [22813419](#)

[Improving state health policy assessment: an agenda for measurement and analysis.](#)

Macinko J, Silver D.

Am J Public Health. 2012 Sep;102(9):1697-705.

DOI: 10.2105/AJPH.2012.300716. Epub 2012 Jul 19. Review.

PMID: [22813417](#)

PBRN

Dr. Glen Mays Lends a Hand in NYC Storm Relief Efforts

UK College of Public Health faculty member Dr. [Glen Mays](#) is an elite runner who's run more marathons than most runners dream of – even winning some of them – and logs dozens of miles each week, so he undoubtedly would have done well in the [2012 ING New York City Marathon](#). But, when Superstorm Sandy prompted the last-minute cancellation of the race, Mays did *good* instead.

Mays, the F. Douglas Scutchfield Endowed Professor in the [UK College of Public Health](#) and director of the Public Health Practice-Based Research Networks, was one of around 40,000 runners who showed up in New York City for the Nov. 4 race, only to learn it was canceled. On Saturday, Nov. 3, Mays ran from his hotel to the pre-race expo, picked up his race packet and headed back to his hotel. When he checked his messages, he learned that the race had been canceled, around 36 hours before the annual event was set to run. [Click here](#) to read the full news release.

Minnesota Public Health PBRN Identifies Factors that Facilitate Local Implementation of Evidence-Based Prevention Strategies

During the November PBRN monthly virtual meeting, [Renee Frauendienst](#), [Kim Gearin](#) and [Beth Gyllstrom](#) described ongoing research examining the influence of local public health resources and quality improvement (QI) capabilities on the ability to implement evidence-based intervention strategies for preventing chronic disease. [Minnesota's Statewide Health Improvement Plan](#) (SHIP) provided grants to community health boards (CHBs) and tribal governments across the state to employ best practices and proven, science-based strategies to decrease obesity by increasing physical activity and improving nutrition, and to reduce tobacco use and exposure. The [Minnesota Department of Health](#) provided the menu of evidence-based, policy, systems and environmental (PSE) change strategies, but local public health and tribal health agencies had the freedom to choose from this menu for the strategies that best fit the needs of their individual communities. Using quantitative survey data from all local health departments in the state, and qualitative interviews with a subset of 15 multi- and single-county agencies, the team found that local health department funding levels and QI capabilities were positively associated with successful implementation of evidence-based prevention interventions. Additional factors that appeared to contribute to successful implementation included dedicated program staffing, local agency leadership with strong ties to their Community Health Board, and a statewide implementation strategy that allowed

for regional sharing of ideas and resources. An archive of this presentation will soon be available on the PBRN website [here](#).

MPROVE Core Measures Selected

The final set of measures has been selected and finalized for the [Multi-Network Practice and Outcome Variation Study \(MPROVE\)](#), following the November virtual meeting and a second round of Delphi scoring by participants. As part of the study, six participating PBRNs will collect and analyze a core set of measures of public health service delivery across the multiple local practice settings represented in the networks. A total of eight “bundles” of service delivery measures were selected within the three domains of chronic disease prevention, communicable disease control, and environmental health protection. The eight measure bundles include: (1) tobacco prevention and control; (2) obesity prevention; (3) immunization; (4) enteric disease control; (5) sexually transmitted infection control; (6) tuberculosis control; (7) lead protection and (8) food protection, with optional bundles identified for oral health promotion and water system protection. Collectively, the bundles include measures of service delivery availability, capacity, reach, volume, intensity, and quality. The participating networks will now move into the data collection phase of the study.

Policy

2013 ‘I’m Your Community Guide!’ Contest: Share How You’ve Used the Community Guide

In an effort to promote the [Guide to Community Preventive Services](#), also known as the Community Guide, the [Public Health Foundation](#) is collecting stories from those who have used or are currently using the Community Guide to improve health in their community. Stories are due Jan. 31, 2013. Here’s how to [submit your story](#).

Public Health Foundation Seeking Health Department Stories on Successful Applications of Performance Management and Quality Improvement

The [Public Health Foundation](#) is collecting and promoting stories from state, tribal, local, and territorial health departments that have utilized performance management systems and/or quality improvement (QI) tools to improve the health of their communities. Find out more [here](#).

NAS Report: Using Science as Evidence in Public Policy

In a policy environment that increasingly demands detailed performance measures, rigorous evaluation, and accountability in decision-making, this [National Academy of Sciences publication](#)

outlines current scholarship on the use of research knowledge, discusses a framework for the use of science in policy, and presents a research agenda on the relationship between scientific evidence and decision-making.

Washington Update

As part of the collaborative effort between the [National Coordinating Center for PHSSR](#) and [AcademyHealth](#), AcademyHealth offers a Washington update on federal activities relevant to the field of PHSSR.

For this month's InsideTrack, [Dr. Lisa Simpson](#), President/CEO of AcademyHealth, offers her perspective on the current climate in Washington and its effect on PHSSR. [Click here](#) to view the slides.

Learn More About Accreditation and Performance Improvement at NNPHI

- [The National Public Health Performance Standards](#) (NPHPS) improve the quality of public health practice and performance of public health systems by providing systems-focused standards for performance. The standards identify areas for system improvement, strengthen state and local partnerships, and assure that a strong system is in place to respond to day-to-day public health issues and emergencies. NNPHI is one of seven national partners that coordinate to implement this program. Learn about the NPHPS and sign up for the free, monthly [Agency, Systems, and Community Health Improvement webinar series](#).
- [Strengthening the Community of Practice for Public Health Improvement](#) (COPPHI) is a two-year, \$1.75 million project led by NNPHI and funded by the [Robert Wood Johnson Foundation](#) (RWJF) that facilitates the exchange of best practices and builds capacity among the nation's public health departments to become accredited and conduct quality improvement (QI). COPPHI promotes shared learning among a broad range of local, state, and tribal health department representatives; public health institutes; universities; national public health organizations; funders; policy-makers; government agencies; and boards of health.
- [Public Health Performance Improvement Toolkit](#): This online collection of tools, templates, trainings, and related resources has been developed by public health practitioners through their work in public health improvement and in preparation for national voluntary accreditation.

Fundina

RWJF/NNPHI PHSSR Call for Proposals

Deadline for Brief Proposals: Tuesday, Dec. 18, 2012

Brief proposals are due on **Tuesday, Dec. 18, 2012**, for a [Call for Proposals](#) for Public Health Services and Systems Research (PHSSR) from the [Robert Wood Johnson Foundation](#). Approximately \$3.2 million will be awarded through this solicitation to support short-term studies as well as complex and comprehensive studies. Guided by the [national research agenda](#) for PHSSR, this solicitation aims to further advance the field of PHSSR with the ultimate goal of improving the performance and efficiency of the public health system and the health of the people it serves, regardless of who they are or where they live.

The [National Network of Public Health Institutes](#) will facilitate this Call for Proposals. Additional information about project can be found on the NNPHI [website](#). Please direct any questions to Erica Johnson at phssr@nnphi.org or 504-301-9854.

Patient-Centered Outcomes Research Institute (PCORI):

[Improving Methods for Conducting Patient-Centered Outcomes Research](#)

Letter of Intent Due Date: Jan. 15, 2013

Application Deadline: March 13, 2013

Every day, patients and their caregivers face crucial healthcare decisions while lacking key information that they need. The [Patient-Centered Outcomes Research Institute](#) (PCORI) has addressed this lack of information in its National Priorities and Research Agenda and has issued funding announcements requiring a comparative clinical effectiveness approach that engages patients in collaboration with their clinicians. To support the conduct of meaningful patient-centered outcomes research (PCOR) and to produce valid findings, it is critical to continue developing stronger research methods in a number of areas.

[Third Cycle Funding Announcements](#)

Letter of Intent Due Date: Feb. 15, 2013

Application Deadline: April 15, 2013

PCORI has launched the third cycle of funding requests to support \$96 million in comparative clinical effectiveness research that will give patients and those who care for them the ability to make better-informed health care decisions. The new [PCORI Funding Announcements](#) (PFAs) correspond to four of the five areas of focus outlined in its [National Priorities for Research and Research Agenda](#):

- Assessment of Prevention, Diagnosis, and Treatment Options -
for projects that address critical decisions that patients, their

- 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 - 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.

An additional PFA that addresses PCORI's fifth priority, [Accelerating Patient-Centered and Methodological Research](#), Improving Methods for Conducting Patient-Centered Research, is mentioned above.

PCORI is an independent, non-profit organization authorized by Congress in 2010 to fund research that will provide patients, their caregivers and clinicians with evidence-based information needed to support better-informed health care decisions. PCORI is committed to continuously seeking input from a broad range of stakeholders to guide its work. More information is available at www.pcori.org.

National Institutes of Health:

[NIH/NIMHD Transdisciplinary Collaborative Centers for Health Disparities Research \[U54\]](#)

Letter of Intent Due Date: Dec. 15, 2012

Application Deadline: Jan. 15, 2013

The [National Institute on Minority Health and Health Disparities](#) (NIMHD) seeks to establish specialized Transdisciplinary Collaborative Centers (TCCs) for Health Disparities Research comprising regional coalitions of academic institutions, community organizations, service providers and systems, government agencies and other stakeholders focused on priority research areas in minority health and health disparities. The purpose of this funding opportunity is to support the development of TCCs focused specifically on health policy research. Applications must identify collaborating partners within and across the proposed region. TCCs funded in response to this FOA must include a one-year planning phase and a four-year program implementation phase. See the complete [RFA](#) for guidelines and additional details.

[Prescription Drug Abuse \(R01\)](#)

Open Date: Jan. 5, 2013

[Prescription Drug Abuse \(R21\)](#)

Open Date: Jan. 16, 2013

The [National Institute on Drug Abuse](#) (NIDA) encourages applicants to develop innovative research applications on prescription drug abuse, including research to examine the factors contributing to prescription drug abuse; to characterize the adverse medical, mental health and social consequences associated with prescription drug abuse; and to develop effective prevention and service delivery approaches and behavioral and pharmacological treatments. Applications to address these issues are encouraged across a broad range of methodological approaches including basic science, clinical, epidemiological, and health services research to define the extent of the problem of prescription drug abuse, to characterize this problem in terms of classes of drugs abused and combinations of drug types, etiology of abuse, and populations most affected (including analyses by age group, race/ethnicity, gender, and psychiatric symptomatology). Studies on individual- and patient-level factors, prescriber factors, and/or health system factors are encouraged, as are studies on all classes of prescription drugs with high abuse liability, including analgesics, stimulants, sedative/hypnotics and anxiolytics. Researchers are further encouraged to study the relationship between the prescription medication, the indication for which the medication was prescribed (e.g., pain, sleep disorder, anxiety disorder, obesity), and the environmental and individual factors contributing to abuse.

[NLM Grants for Scholarly Works in Biomedicine and Health \(G13\)](#)

Letter of Intent Due: Jan. 21, 2013

Application Due: Feb. 21, 2013

NLM Grants for Scholarly Works in Biomedicine and Health are awarded for the preparation of book-length manuscripts and other scholarly works of value to U.S. health professionals, public health officials, biomedical researchers and historians of the health sciences.

Agency for Healthcare Research and Quality

[AHRQ Conference Grant Program \(R13\)](#)

Application Due: Feb. 1, May 1, Aug. 1, and Nov. 1, 2013

The [Agency for Healthcare Research and Quality](#) (AHRQ), announces its interest in supporting conferences through the AHRQ Conference Grant Program. AHRQ seeks to support conferences that help to further its mission to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. The types of conferences eligible for support include: research development, research design and methodology, dissemination and implementation conferences, research training, infrastructure and career development. This funding opportunity announcement supersedes previous AHRQ Conference Grant FOA's, including [PA-09-231](#) (the AHRQ Small Grant Program for Conference Support) and [PAR-09-257](#) (the AHRQ Grant Program for

Large or recurring Conferences).

Events

Meetings

[2013 Public Health Law Research: Driving Legal Innovation](#)

Jan. 16-18, 2013

New Orleans, La.

[National Health Policy Conference](#)

Feb. 4-5, 2013

Washington, D.C.

[Environmental Health 2013: Science and Policy to Protect Future Generations](#)

March 3-6, 2013

Boston, Mass.

[PHSSR Keeneland Conference](#)

April 8-11, 2013

Lexington, Ky.

Webinars

EDM Forum Webinar on Analytic Methods for CER & PCOR

Attend a free EDM Forum webinar from 1-2:30 p.m. on Dec. 18 that will address methodological considerations for collecting and using electronic clinical data for research and QI. The session will present a data quality assessment framework in multi-site studies to distinguish true variations in care from data quality problems, and describe selected conceptual and practical challenges of developing multi-site diabetes and asthma registries. Authors from the EDM Forum's Medical Care free, open access [supplement](#) released in June will be featured, including: [Russell E. Glasgow](#), PhD, National Cancer Institute; [Jay R. Desai](#), MPH, HealthPartners; and [Michael G. Kahn](#), MD, PhD, University of Colorado Denver. Register [here](#).

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