

PHSSR InsideTrack-July 2012



Quality Improvement

Public Health Services and Systems Research (PHSSR) is a vast field that needs talented practitioners and researchers to establish cause-and-effect relationships to better understand the efficacy of public health interventions. I have a special interest in a small but important area of PHSSR that deals with Performance

Management and Quality Improvement (QI).

Performance management is a comprehensive approach to manage the behavior and results of an organization, which consists of all the activities to ensure that goals are consistently met. On the other hand, QI consists of a disciplined application of techniques and methods to improve the metrics in a specific process. One of the most important programs underway today to improve public health department performance is the Public Health Accreditation Board (PHAB) initiative to accredit governmental and tribal health departments. PHAB accreditation is based on the philosophy and practice of continuous quality improvement. Combining accreditation and QI is a powerful way to improve the overall performance of health departments that should result in improved population metrics. The Robert Wood Johnson Foundation and the CDC have provided significant support for health departments to undertake QI initiatives, and hundreds of projects have been successfully completed in the last five years.

While QI is widely known as an effective management technique, it is less developed as a scientific method. An important frontier for PHSSR is to implement a research agenda for public health accreditation and QI. Developing the science of improvement for public health is essential in order to establish cause-and-effect relationships that can

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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.

be replicated in all types of public health settings. I am excited to collaborate with many talented researchers and practitioners in PHSSR to work on these important research goals. After 20 years' experience as a senior executive in health care organizations focused on population health and extensive use of QI, my career path has moved to the public health field and PHSSR research.

Dr. William Riley

University of Minnesota School of Public Health

Research

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Characteristics of Kentucky local health departments that influence public health communication during times of crisis: information dissemination associated with H1N1 novel influenza.

Howard AF, Bush HM, Shapiro RM 2nd, Dearing A.

J Public Health Manag Pract. 2012 Mar-Apr;18(2):169-74.

PMID: 22286286

<http://www.ncbi.nlm.nih.gov/pubmed/22286286>

Attempts by one local health department to provide only essential public health services: a 10-year retrospective case study.

Richardson JM, Pierce JR Jr, Lackan N.

J Public Health Manag Pract. 2012 Mar-Apr;18(2):126-31.

PMID: 22143008

<http://www.ncbi.nlm.nih.gov/pubmed/22143008>

Tough choices in tough times: enhancing public health value in an era of declining resources.

Kuehnert PL, McConaughay KS.

J Public Health Manag Pract. 2012 Mar-Apr;18(2):115-25.

PMID: 22134678

<http://www.ncbi.nlm.nih.gov/pubmed/22134678>

Call for Abstracts

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* under the theme of Academic Health Departments. We are pleased that Paul Campbell Erwin, MD, DrPH, Professor and Department Head, Department of Public Health, University of Tennessee and C William Keck MD MPH Professor Emeritus

Tennessee and Dr. William Keey, MD, MPH, Professor Emeritus, Department of Family and Community Medicine, Northeast Ohio Medical University have agreed to serve as guest editors for this issue.

Abstracts should be submitted to Lloyd F. Novick, MD, MPH, Editor, *Journal of Public Health Management and Practice* novickl@ecu.edu.

Click [here](#) for additional information.

Award Winning Research



AcademyHealth's PHSR Interest Group recently announced the [5 most noteworthy articles from 2011](#). *Why Behavioral and Environmental Interventions are Needed to Improve Health at Lower Cost* by Bobby Milstein et al received the Article of the Year Award at the [11th Annual Interest Group Meeting](#), June 26-27 in Orlando.

AcademyHealth recently announced a new "Senior Fellow for Public Health Translation" opportunity. Those interested in the position are encouraged to apply by the end of July for an August selection. Find out more [here](#).

Two New Online Resources Provide Tools for PHSSR Community

National Coordinating Center for PHSSR Launches New Website

Find valuable resources and make connections at the newly redesigned National Coordinating Center for PHSSR and Public Health Practice-Based Research Network National Coordinating Center website – www.publichealthsystems.org. The new site features easy-to-use navigation that provides researchers, practitioners and policy-makers with quick access to information and resources such as databases, articles, news and upcoming events.

Take a few minutes to find out how publichealthsystems.org can help you, and give us feedback at news@publichealthsystems.org.

National Network of State and Local Health Surveys Announces New Online Resource

The National Network of State and Local Health Surveys recently launched its new website, statelocalhealthsurveys.net.

The goal is for the website to become a valuable resource for current and future survey leaders, data users, and researchers. The content will be member-driven, so your feedback is encouraged and appreciated. The website is public, but to participate in the forums and view certain news in the future, you will need to be a registered user. Sign up for

the site and introduce yourselves in the forums.

Survey Leaders are invited to complete the online profile form, and profile pages will be set up and linked to your program site. The form is similar to the one used for the annual meeting, but does include a few new pieces of information to add to the profile.

You're invited to submit news from your projects, resources to share with other survey leaders, and articles you feel would be important to this community. You can use the online form to easily submit these, or send an email to ajscheitler@ucla.edu.

July/August Issue of JPHMP Focuses on Public Health Funding

The current issue of the [*Journal of Public Health Management and Practice*](#) focuses on *Public Health Funding* – the journal's third issue dedicated to finance. Along with the contents of [previous issues](#) in 2004 and 2007, the articles in this issue establish a foundation for the allocation and policies governing the use of public health funds. Appropriately, the issue comes on the heels of the April 2012 release of the Institute of Medicine report, [*For the Public's Health: Investing in a Healthier Future*](#).

PBRN

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The Political Economy of Public Health Districts

New research from the Connecticut Public Health Practice-Based Research Network (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 www.publichealthsystems.org/pbrn.aspx.

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 in June at the University of Minnesota, 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. Bishai is a professor of health economics at the 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. Santerre, 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, Ore., in June.

The Public Health PBRN 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.

Funding

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Awards Aim to Develop New Generation of Public Health Services & Systems Researchers DEADLINE-August 8, 2012

Developing the next generation of researchers who will examine how the organization, financing and delivery of public health services affect population health – a field known as public health services and systems research, or PHSSR – is the goal of a new round of [funding opportunities](#) from the National Coordinating Center for PHSSR and the Robert Wood Johnson Foundation (RWJF).

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The research resulting from these awards will provide relevant information to public health practitioners and policy-makers, contributing evidence that is urgently needed to improve the population's health and the quality, efficiency and equity in public health practice, improving 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.

Click [here](#) to view full details and learn how to apply.

**Center for Sharing Public Health Services:
Shared Services Learning Community
DEADLINE-August 29, 2012**

Public health agencies play a critical role in our nation's health system. The dramatic increases in the length and quality of life for so many Americans over the past century are attributed, in large part, to the efforts of public health and the work of public health agencies to keep people healthy and safe. As communities face new challenges, like the increasing burden of chronic disease and lean fiscal environments, and new opportunities like advances in technology, many public health officials and policy-makers are exploring new ways to organize and structure the management and delivery of public health services. One such strategy is the sharing of services, resources and functions across multiple public health agencies and jurisdictions. Referred to as cross-jurisdictional sharing (CJS), these arrangements range from informal agreements around sharing discrete services or programs, to regionalization including the formal merger or consolidation of multiple public health agencies. To better understand the opportunity and impact of cross-jurisdictional sharing among public health agencies, the Robert Wood Johnson Foundation (RWJF) will fund up to 18 teams across the country that are exploring, implementing or improving cross-jurisdictional sharing arrangements to participate in the Shared Services Learning Community.

RWJF will provide two-year grants of up to \$125,000 to up to 18 teams of public health officials, policy-makers, and other stakeholders that are exploring, implementing and/or improving CJS arrangements between two or more public health agencies. The Shared Services Learning Community will foster a peer learning environment among teams that are taking a systematic approach to CJS arrangements to achieve the dual goals of greater efficiency and enhanced public health capacity.

Click [here](#) for full details and information on how to apply.

Events

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NACCHO 2012 in Los Angeles, California

The Public Health Research Track at NACCHO Annual provided a unique opportunity for interaction among public health researchers and public health practitioners. NACCHO Annual is the year's largest gathering of local health department professionals, and this year's Public Health Research Track explored timely and important issues in public health practice, including:

- Using law to strengthen public health;
- Economic impacts on local health department practice;
- Quality improvement at local health departments; and
- Providing essential public health services through multi-jurisdictional entities.

To learn more about the conference, go to <http://www.nacchoannual.org/>.

NALBOH 2012 in Atlanta, Georgia

The 2012 Annual NALBOH Conference is designed to provide attendees with information about past public health achievements, current public health priorities, and the role of governance in shaping the future of public health.

Register now for [NALBOH's 20th Annual Conference](#) Aug. 8-10 in Atlanta, Ga.

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