

Issue #107

Public Health PBRN Review | November 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.

Stat of the Month: In its ongoing study of the role of local health departments in prevention of foodborne outbreaks, the Ohio Research Association for Public Health Improvement found that 64% of participating registered sanitarians perceive limitations in their food inspection time due to competing demands.

PBRN NEWS

Minnesota Public Health PBRN Identifies Factors that Facilitate Local Implementation of Evidence-Based Prevention Strategies. During the November 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. 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 which 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 have 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.

PBRNs at APHA. We are pleased to report that the Public Health PBRNs were omnipresent at this year's APHA in San Francisco. Nine networks, along with investigators from the National Coordinating Center, were responsible for more than 20 oral and poster presentations on topics ranging from Health Administration to Public Health Education and Promotion to Community Health Planning and Policy Development. Each year, APHA provides an important venue for networks' findings to audiences from diverse public health backgrounds, increasing avenues for collaboration, promoting the growth of the field, and supporting the translation of new evidence into policy and practice. Well done, everyone!

Quarterly Calls. The National Coordinating Center is nearing the final stage of the most recent round of Quarterly Check-In Calls with member networks. If your PBRN is among the few who have not yet spoken with NCC staff, please make arrangements to do so as soon as possible. By ensuring that the information that

we have is up to date, you can help make certain that your network receives the timely information about funding opportunities and resources. The calls also provide a great opportunity to let us know how we can help navigate research or dissemination challenges that you might be encountering. If you have questions about the Quarterly Calls, please send an email to PublicHealthPBRN@uky.edu or call 859-218-0343.

Grants Administration Corner. In recent months, the National Coordinating Center has added a Grants Administration Corner to all regularly-scheduled virtual meetings. These segments strive to provide PBRN grantees with the information and tools that you need to effectively and efficiently manage your awards. From travel to roles and responsibilities, the Corner highlights current policies and procedures. Much of this information -- including who to contact with questions and where to send reports and products -- is also included at the end of each Public Health PBRN Review under the *Administration* section. Please let us know if you have questions and/or ideas for future Grants Administration Corner segments.

Keep up with PBRN News and Conversations Online at:

Our website: www.publichealthsystems.org/pbrn.aspx

LinkedIn Group: [Public Health PBRN National Coordinating Center LinkedIn Group](#)

Public Health PBRN Twitter: [@PH_PBRN](#)

RELATED NEWS

The Patient-Centered Outcomes Research Institute (PCORI) Request for Information to gather [Input on Research Networks](#)

PCORI has issued this Request for Information to gather as much information as possible about the potential of research data networks to provide opportunities for conducting PCOR. This collected information will assist PCORI's considerations in releasing a funding announcement in this area. In addition to learning more about the known infrastructure landscape, PCORI hopes to discover unknown opportunities about networks that could facilitate efficient, effective PCOR. Responses are being accepted through January 4, 2013. ***We strongly encourage Public Health PBRNs to submit information about their research networks as part of this important effort. Contact the Coordinating Center for***

assistance if desired.

Quarterly Skill-Building Webinar November 2012. National Coordinating Center Director Glen Mays presented *Conducting Comparative Effectiveness Research and Patient Centered Outcomes Research Studies in PHSSR: Design, Analysis, and Funding Considerations*, as part of the center's training webinar series. With increasing CER and PCORI funding opportunities on the horizon, this webinar helped to set the stage for PBRNs considering their own potential roles in these growing research areas. This timely information will be invaluable for generating research questions, grantwriting, and conducting relevant research. An archive of this presentation will appear shortly on the PBRN website [here](#).

ON THE HORIZON

December PBRN Monthly Virtual Meeting. The December 2012 edition of the Public Health PBRN Virtual Meeting will be conducted on Thursday, December 20, from 1:00-2:30pm ET and will feature the Massachusetts Public Health PBRN.

WEBINARS

Leveraging the Media to Gain Policymaker Support Slate for December 14th at 1pm Eastern. This Robert Wood Johnson Foundation webinar will assist participants in navigating the media to disseminate key messages. The session will focus on how to engage local and national media in ways that help you get the attention of policymakers, and eventually, help grantees shape good policy. Register [online](#).

Effective Strategies for Communicating Public Health Findings with the Media and Policymakers. This recent AcademyHealth webinar is now archived [online](#).

DISSEMINATION

Calls for Papers and Products

Call for Session Proposals for Public Health Research Track at NACCHO Annual Conference Deadline: December 19, 2012

The [NACCHO Annual Conference](#) in Dallas (July 10-12, 2013) 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 learn from the research experiences of others and 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. More information and a link to the online abstract submission system [here](#). Please contact Carolyn Leep (cleep@naccho.org) with any questions about the Public Health Research Track.

Keeneland Conference Abstract Submission Now Open

Deadline: January 7, 2013

The National Coordinating Center for Public Health Services and Systems Research is accepting [abstract submissions](#) for the [2013 Keeneland Conference](#). Each April, the Center invites researchers, practitioners and policymakers to gather in Lexington, KY to discuss innovative ways to improve the nation's public health system. Please note that if you are submitting a panel, individual abstracts will need to be completed for *each* presentation, with the narrative noting that the presentation is part of a specific panel.

AcademyHealth Annual Research Meeting Call for Abstracts

Deadline: January 17, 2013

The [AcademyHealth Annual Research Meeting](#) in Baltimore (June 23-25) is designed for health services researchers, providers, key decision makers, clinicians, graduate students, and research analysts who want to examine emerging research issues critical to the organization, financing, and management of health services; get updates on the latest research studies and current health policy issues; hear the research funding priorities of foundations and federal agencies; and explore the impact of health services research on improving access and quality of care. More information and a link to the online abstract submission system [here](#).

CDC *Preventing Chronic Disease* Journal accepting submissions for 2012 Student Research Paper Contest

Deadline: January 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 **5:00 PM EST on January 23, 2013**. For more information on the contest and how to submit your manuscript, visit [PCD Student Research Contest](#).

RESOURCES

Journal of Public Health Management and Practice Special Issue on Public Health Services and Systems Research. The long-awaited special issue of *JPHMP* focused on PHSSR and PBRN Research is now available [online](#).

New Book on Contemporary Public Health Features the Work of PHSSR and PBRN Leaders. In a comprehensive new volume, editor James W. Holsinger Jr. and a diverse group of scholars and practitioners offer a concise overview of the rapidly evolving field of public health, emphasizing that the need for effective prevention delivery systems and strategies has never been greater. The book includes chapters authored by Drs. Stephen Schoenbaum, Steven Woolf, William Keck, David Mathews, Kaye Bender, and a number of PHSSR and PBRN colleagues including Bill Riley (Minnesota PBRN), Rick Ingram (Kentucky PBRN), Paul Halverson (PBRN National Advisory Committee), Glen Mays (PBRN Coordinating Center), and Debra Pérez (RWJF). The book is published by the [University of Kentucky Press](#) and is dedicated in recognition of the many accomplishments of PHSSR leader Dr. F. Douglas Scutchfield. A book release symposium is scheduled for December 7 and 8.

IOM Report: An Integrated Framework for Assessing the Value of Community-Based Prevention. This [Institute of Medicine report](#), sponsored by the Robert Wood Johnson Foundation, the de Beaumont Foundation, the California Endowment, and the W.K. Kellogg Foundation, examines existing methods of evaluating community-based projects and proposes an integrated framework for assessing the value of community-based prevention activities and interventions.

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.

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. Participants will learn about the main variables found in widely used and validated assessment instruments, with a more in-depth look at a few specific tools (e.g. IMI, ANC, PEDS, PARA, EAPRS & PEAT). Participants also learn how to customize the tools. (Note: some of the variables examined here are included on the MPROVE Inventory of Candidate Measures). For more information, click [here](#).

Building the Science of Community-Engaged Research. The Fall 2012 edition of [Progress in Community Health Partnerships: Research, Education, and Action](#) is a special issue focused on community-engaged research. The journal features policy briefs, ongoing research, lessons learned, and practical tools for developing and sustain community research partnerships.

Archived Virtual Training, Technical Assistance, and Monthly Meetings. Have you missed a recent Coordinating Center-sponsored online training session? Do you remember hearing a useful piece of data in a network member's research report during one of our monthly calls but need to find the exact number and/or source? The Public Health PBRN National Coordinating Center's [website](#) is your one-stop shop for plugging into these resources, with archived materials dating back to 2009.

Glen Mays Selected Works in PHSSR. Visit this online repository for new papers, presentations, and works in progress related to PBRN and PHSSR research by Glen Mays.

FUNDING

New Listings

The Patient-Centered Outcomes Research Institute (PCORI) Funding Announcement

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

Letter of Intent Due Date: January 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.

Patient-Centered Outcomes Research Institute (PCORI)

[Third Cycle Funding Announcements](#)

Letter of Intent Due Date: February 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 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: December 15, 2012

Application Deadline: January 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.

National Institutes of Health

Prescription Drug Abuse (R01) Open Date: January 5, 2013

Prescription Drug Abuse (R21) Open Date: January 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.

National Institute of Health

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

Letter of Intent Due: January 21, 2013

Application Due: February 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: February 1, May 1, August 1, and November 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).

Previous Listings

Agency for Healthcare Research and Quality

AHRQ Individual Awards for Postdoctoral Fellows (F32) National Research Service Awards (NRSA)

Proposal Due: December 8, 2012

The purpose of this individual postdoctoral research training fellowship is to provide support to promising fellows with the potential to become productive, independent investigators in health services research, with a research interest in areas and priorities relevant to the mission of AHRQ. Mechanism of Support. This FOA will use the Individual Postdoctoral National Research Service Award (NRSA) grant mechanism (F32). Funds Available and Anticipated Number of Awards. The total amount to be awarded and the number of F32 fellowships awarded will depend on the quality and scientific merit of the applications received, their relevance to the program priorities of AHRQ and the availability of funds.

ADMINISTRATION

Remember to Route All Questions on Grant Budgeting, Reporting, and Administration to the Public Health PBRN Coordinating Center. The PH PBRN National Coordinating Center is your 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

COORDINATING CENTER CORNER

The Role of the PBRN Coordinating Center.

The Robert Wood Johnson Foundation's mission is to improve the health and health care of all Americans. They do this in a variety of ways by working with diverse groups of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change. One of the main ways of creating solutions, and their major source of grantmaking, is through the establishment of National Program Offices. A National Program Office consists of a cluster of grantees and other interested parties who work together to create impact in a specific program area. The Public Health PBRN National Coordinating Center is a National Program Office of the Robert Wood Johnson Foundation that is creating impact in the area of Public Health. As an NPO, the major functions of the Public Health Coordinating Center are:

- 1) Grantmaking- we facilitate the review of proposals to become project sites.
- 2) Monitoring- we review grantee performance and financial reports and we are in charge of ensuring submissions of grantee reports to the foundation-this is why it is very important to make sure that the Public

Health PBRN Coordinating Center is copied on all report submissions to the foundation.

- 3) Technical Assistance- we provide a range of assistance to project sites and help you implement and sustain your projects.
- 4) Communications- we focus national attention on the Public Health PBRN model and we facilitate a steady flow of communication among sites, the Foundation, and relevant mass and professional media.
- 5) Consultations- we advise the foundation on trends and developments in our practice area.
- 6) Program Leadership- we collaborate with the Foundation on the program's development and work with you, the project sites to enhance implementation.

As an NPO we are here to work with you and to ensure your success. Please email Lizeth.Fowler@uky.edu with any questions.

The Coordinating Center Corner strives to highlight one policy or procedure per issue. Please let us know if there are specific topics you would like us to address by writing PublicHealthPBRN@uky.edu.

CALENDAR

MPROVE Monthly Meetings. Thursdays, 2:00-3:00pm, ET. December 13.

Open Forum for Quality Improvement in Public Health. National Network of Public Health Institutes, Charlotte, NC, December 6-7. [More](#) information.

December PBRN Monthly Virtual Meeting. Massachusetts Public Health PBRN, Thursday, December 20, 1:00-2:30pm, ET.

Environmental Health 2013: Science and Policy to Protect Future Generations. Boston, MA, March 3-6, 2013. [More](#) information.