

**Subject:** Public Health PBRN Review Issue #109 January 2013

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**From:** PublicHealthPBRN

**To:** PublicHealthPBRN



### Issue #109

## Public Health PBRN Review | January 2013

**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.

### STAT OF THE MONTH

The number of people with diabetes who attended disease self-management sessions on a monthly basis increased by **14%**, and the number of people who completed an entire self-management course increased by more than **100%**, following implementation of a quality improvement intervention delivered by Kentucky local health departments to improve delivery of evidence-based diabetes self-management support in community settings. The Kentucky Public Health PBRN's Community Outreach and Change for Diabetes Management (COACH 4 DM) Quality Improvement intervention also found that more than half of participating health departments initiated additional QI projects, while 82% of all program staff indicated that additional QI projects were under consideration in their organizations. Preliminary findings from the study were presented during the Research-in-Progress segment of the January 2013 Public Health PBRN Virtual Meeting. An archive of the presentation will be available on the PBRN website.

### PBRN NEWS

**RE-ACT Podcast Examines Cross-Jurisdictional Sharing with the Massachusetts Public Health PBRN.** The latest episode of the [RE-ACT: Research to Action in Public Health Services and Systems Research](#) podcast is now available online. Host Dr. Paul Halverson speaks with Dr. Justeen Hyde about recent research conducted by the Massachusetts Public Health PBRN to identify characteristics related to successful cross-jurisdictional sharing (CJS) partnerships formed between local health departments. This podcast comes on the heels of a recent [PHSSR Matters](#) from the National Coordinating Center for PHSSR that highlights additional CJS-related Quick Strike research from the Wisconsin Public Health PBRN. This PBRN research promises to add momentum to the work of the recently-launched [Center for Sharing Public Health Resources](#).

**Frontiers Analyzes Wellness Incentives, Hospital Community Benefits, Social Media Adoption:** The PBRN program's journal [Frontiers in Public Health Services and Systems Research](#) opens 2013 with a new volume of emerging studies on public health delivery. The University of Pennsylvania's Harold Schmidt examines the public acceptability of workplace wellness incentive programs, finding that reward-based incentives are favored by the public over penalty-based ones by a factor of four, and that the acceptable size of penalty-based programs is quite small. The findings have important implications for recently released HHS draft regulations on employer wellness programs to be implemented under the federal Affordable Care Act. Also in the issue, George Washington University's Sara Rosenbaum and colleagues offer a

comparative analysis of federal and state community benefit reporting systems for tax-exempt hospitals. The authors find that most state programs lack the specificity and clarity that is contained in the new federal requirements created under the Affordable Care Act, particularly regarding how community benefit is defined, categorized and reported. Together, these studies offer new insight into the roles that key private-sector stakeholders can play in transforming the American public health system. Other new studies in this issue include Jenine Harris' examination of social media adoption among public health agencies, Danielle Varda's assessment of public health roles within systems of care for children with special health care needs, and Rachel Tabak's analysis of dissemination and implementation models in public health. Download your [copy](#) and subscribe today.

**Comparative Results Released from the National Longitudinal Survey of Public Health Systems:** Local public health agencies that are part of the national cohort included in the National Longitudinal Survey of Public Health Systems received their customized, comparative report of results from the 2012 wave of the survey last month. Since 1998, the survey has followed approximately 300 communities to monitor changes in the implementation of public health activities within the community and the range of organizations that participate in these activities. Responding agencies receive a customized report that compares longitudinal data from their communities to national norms and a statistically matched "peer group" of other communities. Research reports and presentations from the 2012 wave of the survey, along with a public use dataset, will be forthcoming later this year. More information on the [survey](#) and an example [report](#) are available online.

**NACCHO Profile Data Collection In Progress.** The National Association of County and City Health Officials (NACCHO) launched the 2013 National Profile of Local Health Departments on Thursday, January 10th. Responses are requested by February 14, 2013. NACCHO would greatly appreciate the assistance of Public Health PBRNs, as well as others from across Public Health Services and Systems Research who utilize the data collected, in promoting and encouraging local health departments to complete the Profile. More information can be found on the Profile [website](#).

**Keep up with PBRN News and Conversations Online at:**

**Our website:** [www.publichealthsystems.org/pbrn.aspx](http://www.publichealthsystems.org/pbrn.aspx)

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

**Public Health PBRN Twitter:** [@PH\\_PBRN](#)

## RELATED NEWS

**Public Health Spending Falls.** A [report](#) on health spending in 2011 showed a decline in public health expenditures by federal, state, and local governments, the first such decline since tracking began in 1960. According to a [recent article](#) in *Kaiser Health News*, Executive Director of APHA Dr. Georges C. Benjamin has stated that such "resource reductions now have been so substantial that it truly does put the public's health at risk." The *KHN* article supports Dr. Benjamin's conclusions by citing Public Health PBRN Coordinating Center Director Glen Mays, whose [2011 Health Affairs article](#) linked a 10 percent increase in local public health spending over more than a decade with reductions in death rates of between 1 percent and 7 percent.

**Trust for America's Health Releases New Report on Prevention Strategies.** The new [report](#) released this week outlines top policy approaches to expand the reach of health promotion and disease prevention strategies. The report also profiles 15 case studies from across the country that illustrate innovative prevention in action, such as the new Accountable Care Community (ACC) launched in Akron, Ohio to manage diabetes on a population-wide basis.

**NIH Launches New Blog on Social and Behavioral Research.** This month NIH's Office of Behavioral and Social Sciences Research (OBSSR) launches The Connector, a new blog featuring OBSSR Director Dr. Robert

M. Kaplan's commentary a broad range of topics such as mHealth, systems science, dissemination and implementation research and the NIH Toolbox. It will also explore strategies for achieving better population health through improved dissemination of evidence-based interventions. The blog will provide an update on the office's activities, trainings, educational resources and funding opportunity announcements, as well as podcasts and videos of conversations with engaging behavioral and social sciences Visit the blog [here](#).

**EPA Seeks Public Comment on the Working Draft of its Policy on Environmental Justice for Tribes and Indigenous Peoples.** The US Environmental Protection Agency seeks public comment on the [Working Draft](#) of its policy on environmental justice for tribes and indigenous stakeholders. Comments will be accepted through February 15, 2013.

## ON THE HORIZON

**February MPROVE Monthly Meeting. Wednesday February 13, 2013 2:00-3:00 pm ET.**

**February PBRN Monthly Virtual Meeting.** The February 2013 edition of the Public Health PBRN Virtual Meeting will be conducted on Thursday, February 21, from 1:00-2:30pm ET and will feature the North Carolina Public Health PBRN.

## DISSEMINATION

*Calls for Papers and Products*

**APHA Abstract Submission Open**

**Deadline: Friday, February 4-8, 2013 (based on section)**

The American Public Health Association is accepting abstracts for the 141<sup>st</sup> Annual Meeting, to be held November 2-6 in Boston, MA. This year's meeting theme is *Think Global, Act Local*. Deadlines for all submissions are the week of February 4-8, with exact deadline varying based on section. Details can be found on the [meeting website](#).

**APHA Special Session Proposals**

**Deadline: Friday, February 8, 2013**

The American Public Health Association is now accepting 90-minute, theme-related but broad-based session proposals for the 141<sup>st</sup> APHA Annual Meeting to be held November 2-6 in Boston, MA. More information is available on the [APHA website](#).

**AcademyHealth Annual PHSR Interest Group Meeting Call for Papers and Panels**

**Deadline: Wednesday, February 13, 2013**

AcademyHealth is accepting abstracts through February 13<sup>th</sup> for its Annual PHSR Interest Group Meeting, to be held June 25-26 in Baltimore, MD, following the Annual Research Meeting. Abstracts are invited in areas related to PHSR research methods, performance improvement and accreditation preparation, linkages to healthcare delivery reform, community engagement and participatory research, and collaborations. More information on the PHSR interest group meeting is available [here](#).

**AcademyHealth Seeks PHSR Article of the Year Nominations.**

**Deadline: Friday, March 1, 2013**

The Public Health Systems Research (PHSR) Group of AcademyHealth has solicited nominations for Article of the Year. Awarded at the annual interest group meeting, Article of the Year recognizes the most notable scientific work in PHSR in 2012. The awardee will receive complimentary registration for both the PHSR interest group meeting and the AcademyHealth Annual Meeting, as well as a \$1,000 travel stipend. [More information](#).

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**National Institute for Health Care Management Foundation Seeks Applications for Its [Outstanding Published Research Award](#).** The National Institute for Health Care Management (NIHCM) Foundation is accepting applications for its 19th Annual Health Care Research Award. The award carries a \$10,000 prize and recognizes excellence in published research in health care financing, delivery, organization, or health policy implementation. Eligible articles will have been published in a peer-reviewed journal during 2012. The deadline for receipt of nominations is February 15, 2013.

## WEBINARS

**RWJF Connect eTraining Series, Policymaker Outreach: Building Partnerships to Advance Policy Objectives, Wednesday, January 30, 2013, 2:00-3:30PM ET.** This session is designed to help researchers identify target and build partnerships with policy-related stakeholders and coalitions. [Register online](#).

**HRSA EnRICH Webinar Series: Applied Missing Data Analysis, Friday, February 25, 2013, 2:00-3:30PM ET.** EnRICH (Research Innovations and Challenges) is a series of webinars that feature special topics related to Maternal and Child Health (MCH) research. The next webinar will feature Dr. Craig Enders, Associate Professor in the Department of Psychology at Arizona State University, who will provide a conceptual overview of missing data theory and assumptions, introduce "traditional" missing data techniques that are widely available in software packages, and provide researchers with a conceptual overview of two "modern missing data handling methods", multiple imputation and maximum likelihood estimation. [Register online](#).

## RESOURCES

**Mendeley Reference Managing Software Provides Social Networking Support for PHSSR Research.** The National Coordinating Center for PHSSR has begun using a new, freely accessible reference managing software, [Mendeley](#), to gather, organize, and distribute literature published by public health services and systems researchers. Not only does this new tool fulfill many of the same needs as EndNote, Mendeley also allows for collaboration and tagging of references, while integrating social networking into both its platforms. An individual's Mendeley account can be accessed anywhere via the internet and there are mobile applications for the iPhone and iPad, with some APIs for Android mobile devices. Check out Mendeley [online](#) today, join the "Public Health Services and Systems Research" group, and stay tuned for a full roll out this spring.

**The Childhood Immunization Schedule and Safety: Stakeholder Concerns, Scientific Evidence, and Future Studies.** The National Academies Press has released this new report from the Committee for the Assessment of Studies of Health Outcomes Related to the Recommended Childhood Immunization Schedule, the Board on Population Health and Public Health Practice, and the Institute of Medicine; which reviews both scientific findings and stakeholder concerns while also identifying potential paths forward to address related issues. The full report is available [online](#).

**[Glen Mays Selected Works in PHSSR](#):** online repository for posting new papers, presentations, and works in progress related to PBRN and PHSSR research by Glen Mays.

## FUNDING

*New Listings*

**Public Health Law Research**  
[Strategic and Targeted Research Program Dissertation Grants](#)

**Deadline for receipt of proposals: February 15, 2013**

Public Health Law Research (PHLR), a national program of the Robert Wood Johnson Foundation, seeks to build the evidence for and strengthen the use of regulatory, legal and policy solutions to improve public health. As part of this effort, PHLR is offering dissertation grants to train doctoral students in public health

law research methods, including the development of legal datasets. PHLR invites current PhD students in accredited doctoral degree programs to apply.

### **Leveraging Existing Natural Experiments to Advance the Health of People with Severe Mental Illness (R24)**

**Letter of Intent Due Date: February 11, 2013**

**Application Deadline: March 11, 2013**

People with severe mental illness (SMI) die from the same causes as those in the general population, e.g., heart disease, diabetes, cancer, stroke, and pulmonary disease. However, these diseases are more common in people with SMI and lead to earlier death. The modifiable health risk factors that contribute to these diseases—smoking, obesity, hypertension, metabolic disorder, substance use, low physical activity, poor fitness and diet—are also more common and have an earlier onset in people with SMI. Iatrogenic effects of psychiatric medications, which may include weight gain and metabolic disorder, add to these health risks. Effective interventions to reduce these common modifiable health risk factors exist for the general population. However, these interventions are generally unavailable to people with SMI and evidence is sparse on how to bring them to this population. Many state and local health authorities have implemented innovative services interventions to reduce the identified health risk factors and premature mortality in people with SMI, though their effectiveness for this population and the degree of adaptation needed for effectiveness remain unknown. The National Institute of Mental Health (NIMH) seeks to leverage these existing natural experiments by building research capacity for subsequent rigorous testing of services interventions already implemented at state and local levels for adults, youth or children. [More information.](#)

### **California Breast Cancer Research Program (CBCRP)**

#### **Community Research Collaboration Awards**

**Proposals Due: March 28, 2013**

The CBCRP is accepting applications for Cycle 19 Community Research Collaboration (CRC) Awards. A full description of the awards in [Call for Applications](#) and on the [Community Research Collaboration pages](#).

### **Agency for Healthcare Research and Quality**

#### [AHRQ Health Services Research Demonstration and Dissemination Grants \(R18\)](#)

**Proposal Due: January 25, May 25, September 25, 2013**

The Research Demonstration and Dissemination Grant (R18) is an award made by AHRQ to an institution/organization to support a discrete, specified health services research project. The project will be performed by the named investigator and study team. The R18 research plan proposed by the applicant institution/organization must be related to the mission and portfolio priority research interests of AHRQ.

### **Agency for Healthcare Research and Quality**

#### [AHRQ Health Services Research Projects \(R01\)](#)

**Proposal Due: February 5, June 5, October 5, 2013**

The Research Project Grant (R01) is an award made by AHRQ to an institution/organization to support a discrete, specified health services research project. The project will be performed by the named investigator and study team. The R01 research plan proposed by the applicant institution/organization must be related to the mission and portfolio priority research interests of AHRQ.

### **Health Resources and Services Administration**

#### [Telehealth Network Grant Program](#)

**Proposal Due: February 13, 2013**

This announcement solicits applications for the Telehealth Network Grant Program (TNGP). The primary objective of the TNGP as noted in Section 330I(D)(1) is to demonstrate how telehealth programs and networks can improve access to quality health care services in rural, frontier, and underserved

communities. TNGP networks are used to: (a) expand access to, coordinate, and improve the quality of health care services; (b) improve and expand the training of health care providers; and/or (c) expand and improve the quality of health information available to health care providers, and patients and their families, for decision-making. To further elaborate on the program's statutory requirements noted above, applicants are encouraged to develop innovative applications that meet new and emerging needs in a changing health care delivery system with a focus on value and improved health care outcomes.

#### **Agency for Healthcare Research and Quality**

[Notice of Intent to Publish a Funding Opportunity Announcement \(FOA\) for the Developing Evidence to Inform Decisions about Effectiveness \(DECIIDE\) Network for Patient-Centered Outcomes Research \(U19\)](#)

**FOA Anticipated Release Date: Late Winter 2013**

**First Estimated Application Date: Spring 2013**

AHRQ intends to publish a Funding Opportunity Announcement (FOA) to broadly solicit applications for research centers to participate in the "Developing Evidence to Inform Decisions about Effectiveness" (DECIIDE) Network, a component of [AHRQ's Effective Health Care Program](#). AHRQ plans to continue the collaborative research network that it established in 2005 with a specific focus on comparative effectiveness and patient-centered outcomes research (CER/PCOR) and methodologies that are designed to support evidence-base decision-making in patient communities served by (1) Medicare; or (2) State Medicaid and/or Children's Health Insurance (CHIP) programs. Overall FOA objectives are to conduct original research and appropriately disseminate the results to stakeholders.

#### **Medicaid Expansion and Reproductive Health Care for Women**

**Letter of Intent Due: February 4, 2013**

**Proposal Due: March 4, 2013**

The intent of this FOA is to study the use of medical services and health outcomes among low-income women of reproductive age (15-44 years), before and after expansion of Medicaid eligibility. This research will require linkage of state Medicaid data with other key maternal and child health datasets including, but not limited to, birth certificates, death certificates, and hospital discharge data. [More information.](#)

#### *Previous Listings*

#### **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. These 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](http://www.pcori.org).

### **AcademyHealth**

#### **[Delivery System Science Fellowship](#)**

**Statement of Intent Due: January 31, 2013**

**Proposal Due: February 15, 2013**

The new Delivery System Science Fellowship (DSSF) provides a paid post-doctoral learning experience to help recent graduates and new researchers gain applied experience conducting research in delivery system settings. Fellows will work with mentors to develop research projects and papers for peer-reviewed publication, often with access to unique, rich data sources. This year, fellowship placements are available at Geisinger Health System, Intermountain Healthcare, Kaiser Permanente Southern California, Mayo Clinic, Medical Research Institute, Hofstra North Shore- LIJ School of Medicine, and the Palo Alto Medical Foundation Research Institute (PAMFRI). Students and researchers with an interest in conducting research in delivery system settings are encouraged to apply. The DSSF is open to recent doctoral graduates with an interest in building an academic portfolio while cultivating new relationships and perspectives on key issues in the US delivery system. Anticipated start dates are between July and August 2013.

### **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).

### **ADMINISTRATION**

**2013 Public Health PBRN Monthly Virtual Meeting Research Presentations Schedule Set.** During the January Public Health PBRN Virtual Meeting, the National Coordinating Center unveiled the schedule for member networks' presentations in 2013. Monthly research-in-progress presentations will take place as follows:

- February 21 North Carolina PBRN
- March 21 Nebraska PBRN
- April: No Call (Grantee Meeting and Keeneland Conference)
- May 16 Connecticut PBRN
- June 20 Wisconsin PBRN
- July 18 Georgia PBRN
- August 15 Ohio PBRN
- September 19 New Jersey PBRN

- October 17 Tennessee PBRN
- November 21 Washington PBRN
- December 19 Florida PBRN

Any network with a known conflict during its assigned date should work with another PBRN to trade presentation dates and then notify the Coordinating Center of the change by emailing [PublicHealthPBRN@uky.edu](mailto:PublicHealthPBRN@uky.edu).

**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 one-stop source for information and assistance on the administrative aspects of your Public Health PBRN grants, including budgeting, expenditures, subcontracts, and reporting. Please make sure that you send your network's questions to the Coordinating Center (email [publichealthPBRN@uky.edu](mailto: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](http://www.rwjf.org/files/publications/RWJF_GranteeReportingInstructions.pdf)

**RWJF Guidelines for Financial Reports:**

[http://www.rwjf.org/files/publications/RWJF\\_FinancialGuidelinesReporting.pdf](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](http://www.rwjf.org/files/publications/RWJF_ElectronicSubmissions.pdf)

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**Travel Policy for Annual Public Health PBRN Program Grantee Meeting.**

In conjunction with Robert Wood Johnson Foundation and University of Kentucky policies, the Public Health PBRN Program National Coordinating Center is implementing new policies and procedures for travel the Annual Grantee Meeting, scheduled to be held in Lexington, KY on April 8-9, 2013.

The Coordinating Center will cover the costs of travel and lodging for only **one representative** from each PBRN that has had **active RWJF funding in Calendar Year 2013** either through the PBRN Program's RACE, MPROVE, or QuickStrike funding mechanisms or through other eligible RWJF sources. Center-covered travel costs for each designated representative will include airfare, a **two-night** stay at the conference hotel, cab fare, and a small per diem to cover meals not provided during the meeting. To be eligible for this support, the network must provide the name of its designated representative to the Center by **March 1, 2013**. Center-funded travelers who have one or more abstracts accepted for presentation at the annual Keeneland Conference (April 9-11) *may* be eligible for support for one additional night's stay on a first-come, first-served basis, pending availability of funds. All Center-funded travelers will be required to book air travel through the University of Kentucky's travel agent. The Coordinating Center will provide details on booking flights and on reimbursement procedures directly to each network's representative.

Additional PBRN representatives are welcome to attend the meeting; however, the Coordinating Center can only fund travel for the designated representative. The meeting will be simulcast online so that those unable to travel will be able to participate.

Additional information, including reimbursement procedures, will be made available on the public Health



PBRN National Coordinating Center website in early 2013. For questions and additional information, contact [Nicole.Howard@uky.edu](mailto:Nicole.Howard@uky.edu) (phone: 859-218-0113) or [Lizeth.Fowler@uky.edu](mailto:Lizeth.Fowler@uky.edu) (phone: 859-218-2089).

## COORDINATING CENTER CORNER

### Budget Extensions and Revisions

In the course of your research, there may be times where you encounter unanticipated delays or minor budget changes that may require an extension of your award or a budget revision. There is a formal process to request award extensions or budget revisions. This process begins with a written request to the PBRN National Coordinating Center. If you are requesting an extension of your award, you should include an explanation of what caused the change in your project, what new end dates you are requesting, what scope of work will occur during the extension period, what will be the new timeline, benchmarks and/or deliverables and if approved, and how you will inform us of your progress. If you wish to carry over unexpended funds, reallocate funds to different budget categories or anticipate spending more than 10% of the budgeted amount in any budget category, then you will also have to include a budget revision request. Once we review your request, we send our recommendations to RWJF for their approval. Due to the multistage nature of this process, extensions must be requested at least three weeks before the end of the grant date or reporting period. Budget revisions should be requested when you anticipate the possibility of overspending by more than 10% in a budget category. Please contact Lizeth Fowler [Lizeth.Fowler@uky.edu](mailto:Lizeth.Fowler@uky.edu) (859) 218-2089 with any questions or for assistance with this process.

*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](mailto:PublicHealthPBRN@uky.edu).*

## CALENDAR

**AcademyHealth National Health Policy Conference.** Washington, DC, February 4-5, 2013. [More information.](#)

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

**Public Health PBRN Program Annual Grantee Meeting.** Lexington, KY, April 8-9, 2013. For information about travel support, please reference *Administration* above or contact [Nicole.Howard@uky.edu](mailto:Nicole.Howard@uky.edu). Portions of the meeting will be simulcast and/or archived online for those unable to travel.

**2013 Keeneland Conference in PHSSR.** Lexington, KY, April 9-11, 2013. [More information.](#)

**AcademyHealth Annual Research Meeting.** Baltimore, MD. June 23-25, 2013. [More information.](#)

**AcademyHealth Public Health Systems Research Interest Group Meeting.** Baltimore, MD, June 25-26,