The Public Health PBRN Program: A Status Update

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The Public Health PBRN Program: A Status Update

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Public Health PBRN Annual Meeting • Lexington KY • 7 April 2014
Vicious cycles to learning systems

Translate evidence for policy and administrative decisions & advocacy

Discover causes & consequences of variation in public health delivery
Diffusion of Public Health PBRNs

- First cohort (December 2008 start-up)
- Second cohort (January 2010 start-up)
- Affiliate/Emerging PBRNs (2011-14)
A PBRN Timeline

2008
Launch

2009
First cohort of PBRNs start
 RIAs

2010
Second cohort of PBRNs start
 Quick Strikes

2011
Affiliate networks start

2012
RACE Awards

2013
MPROVE Awards

2014
DACS Awards start

DIRECTIVE Awards Announced
Research Progression

Delivery System Organization and Structure

Practice Variation

Volume, Intensity, and Quality of Delivery

Cost of Delivery

Value of Delivery
PBRN Reach

- 31 networks
- 1593 local public health agencies
- 35 state agencies
- 52 academic research units
- 58 professional & community organizations
Productivity & Dissemination

- 60 competitively awarded research projects
- 68 articles in peer-reviewed journals
- 221 presentations and conferences & meetings
- 51 reports & tools in the grey literature
- Earned media in elite venues: *Modern Healthcare*, *Forbes*, *Kaiser Health News*, *PBS*, *Men’s Health*
- >15,000 downloads of *Frontiers in PHSSR* articles
- >8,000 downloads from Research Archive
- >2,000 page views on PublicHealthEconomics blog
# PBRNs and Practice Engagement

Local Health Departments Engaged in Research Implementation & Translation Activities During Past 12 months

<table>
<thead>
<tr>
<th>Activity</th>
<th>PBRN Agencies Percent/Mean</th>
<th>National Sample Percent/Mean</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Identifying research topics</td>
<td>94.1%/27.5%</td>
<td></td>
<td>***</td>
</tr>
<tr>
<td>Planning/designing studies</td>
<td>81.6%/15.8%</td>
<td></td>
<td>***</td>
</tr>
<tr>
<td>Recruitment, data collection &amp; analysis</td>
<td>79.6%/50.3%</td>
<td></td>
<td>**</td>
</tr>
<tr>
<td>Disseminating study results</td>
<td>84.5%/36.6%</td>
<td></td>
<td>**</td>
</tr>
<tr>
<td>Applying findings in own organization</td>
<td>87.4%/32.1%</td>
<td></td>
<td>**</td>
</tr>
<tr>
<td>Helping others apply findings</td>
<td>76.5%/18.0%</td>
<td></td>
<td>***</td>
</tr>
<tr>
<td>Research implementation composite</td>
<td>84.04%/30.20 (27.38)/(31.38)</td>
<td></td>
<td>**</td>
</tr>
<tr>
<td>N</td>
<td>209</td>
<td>505</td>
<td></td>
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</tbody>
</table>
National Coordinating Center

- Intramural research activities
  - **Public Health Value**: Cost estimation & economic evaluation
  - **Public Health Reform**: Effects of ACA on public health delivery

- Extramural research programs
  - Quick Strike studies
  - Multi-network research activities
Data Development
- Periodic census surveys of local and state agencies
- National Longitudinal Survey of Public Health Systems
- Public Health Activities and Services Tracking (PHAST): compiling existing administrative data across states

Dissemination & Translation
- Weekly Work in Progress Webinars
- Open-access journal: *Frontiers in PHSSR*
- Newsletters, Podcasts, Blogs
- Briefings with policy stakeholders
Future Directions

- RWJF’s *Culture of Health* strategic direction
- Population health improvement strategies
- Bridging public health and health care
- Strategies to enhance value
- Monitoring health reform implementation & impact
- Federal research funding
Toward a “rapid-learning system” in public health

In a learning health care system, research influences practice and practice influences research.

**Evaluate**
- Collect data and analyze results to show what does and does not work.

**Adjust**
- Use evidence to influence continual improvement.

**Disseminate**
- Share results to improve care for everyone.

**Implement**
- Apply the plan in pilot and control settings.

**Design**
- Design care and evaluation based on evidence generated here and elsewhere.

**Internal**

**External**

For More Information

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Supported by The Robert Wood Johnson Foundation

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