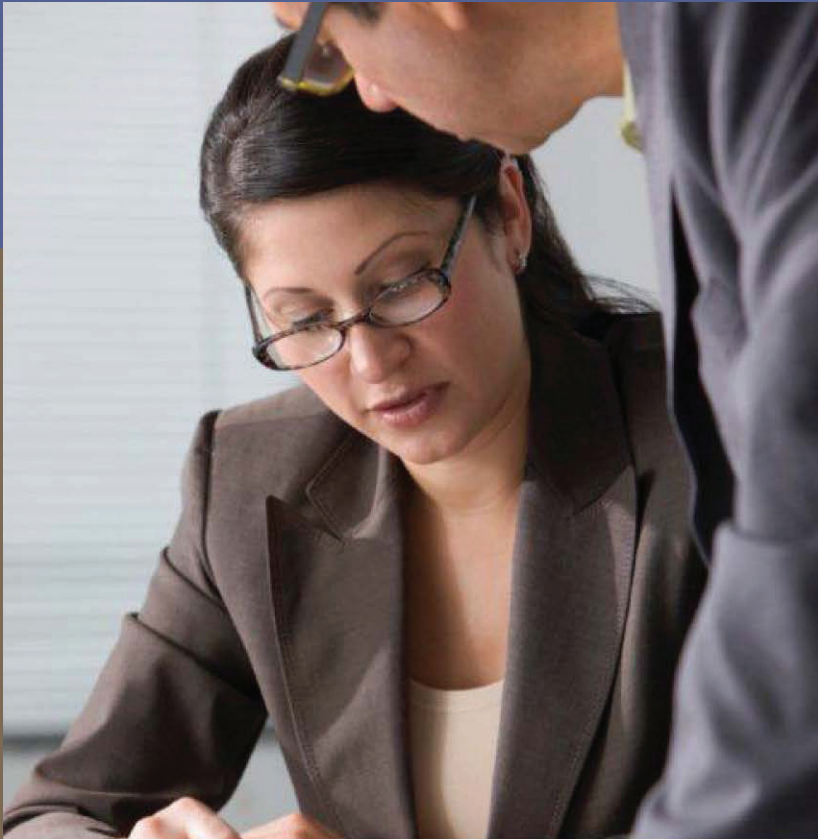




Robert Wood Johnson Foundation

Public Health Services and Systems Research

Mentored Research Scientist Development Awards



2013 Call for Proposals

Proposal Deadline

August 21, 2013

Program Overview

(For complete details, refer to specific pages noted below.)

Purpose

Public Health Services and Systems Research (PHSSR) is a multidisciplinary field of study that examines the organization, financing, delivery and quality of public health services within communities and the resulting impact on population health. The National Coordinating Center (NCC) for PHSSR and the Robert Wood Johnson Foundation (RWJF) seek to expand the evidence base for effective decision-making in public health practice and policy through research that responds to the questions defined in the National Agenda for PHSSR: www.publichealthsystems.org/research-agenda.aspx. This solicitation is intended to strengthen the pool of researchers available to conduct PHSSR and to build on successful principles and models previously demonstrated in public health and health services research. The awards support mentored, intensive career development through funding, educational experiences and protected time to conduct independent research.

Total Awards

- Approximately \$800,000 is available through this solicitation.
- Up to eight grants will be awarded through this solicitation.
- Each grantee will receive up to \$100,000 for a maximum of 24 months.

Eligibility Criteria

Complete eligibility criteria can be found starting on page 8.

Selection Criteria

Complete selection criteria can be found starting on page 10.

Key Dates and Deadlines

- **June 4, 2013 (3 p.m. to 4 p.m. ET)**—Optional applicant Web conference call. To attend, please go to https://connect.uky.edu/phssr_mrsd_awards and select *Enter as a Guest*.
- **August 21, 2013 (3 p.m. ET)**—Deadline for receipt of full proposals.
- **Late October 2013**—Finalists notified.
- **January 2014**—Start of grants.

How to Apply (page 14)

Proposals for this solicitation must be submitted via the RWJF online system. Visit www.rwjf.org/cfp/phssrms2 and use the *Apply Online* link. If you have not already done so, you will be required to register at <http://my.rwjf.org> before you begin the application process.

Please direct inquiries to:

Ann V. Kelly, *project manager*

National Coordinating Center for PHSSR

Phone: (859) 218-2317

Email: PHSSR212@uky.edu

All applicants should log in to the system and familiarize themselves with online application requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, late submissions will not be accepted.

www.publichealthsystems.org/phssr

Background

The scope and scale of public health programs and services vary widely across the United States, as do the institutional and financial agreements used to initiate, deliver and manage public health activities. Relatively little is known about the causes and consequences of this variation, the degree of alignment with community needs and preferences, and the effects on population health. Efforts to improve the quality, efficiency, and outcomes of public health policies and practices require a nuanced understanding of how these activities are implemented within communities and their impact on health.

Several national policy initiatives are driving innovation and improvements to public health delivery systems, including national accreditation for local and state public health agencies, expansion of quality improvement processes in public health settings, and public reporting initiatives such as the *County Health Rankings*. However, public health agencies face continuing fiscal challenges that limit their reach and effectiveness. These challenges are triggering wide-scale agency restructuring and staffing changes, including strategies that leverage resources such as cross-jurisdictional and regional public health collaborations. Additionally, limited financing has had uneven effects on public health delivery systems and the populations they serve—validating the need for evidence to help decision-makers use scarce resources most effectively with greater understanding of the impact of these changes on population health.

Public Health Services and Systems Research (PHSSR) is a multidisciplinary field that examines the organization, financing, delivery and quality of public health services within communities and the resulting impact on the health of the public.^{1,2} PHSSR focuses on population health services, and does not include the study of medical care or “safety-net” services provided by local public health departments and federally qualified health centers. PHSSR strives to inform public health practice and policy, leading to more

effective public health systems, improved population health and addressing health disparities.

The National Coordinating Center (NCC) for PHSSR at the University of Kentucky College of Public Health is leading the effort to expand the use and application of PHSSR in public health policy and practice, guided by the *National Research Agenda for PHSSR*. Critical to this effort is strengthening the PHSSR evidence base³, rapid translation of evidence, expanding the cadre of researchers, and strengthening the skills of existing PHSSR researchers.

In relation to these objectives, the NCC has evaluated efforts to use PHSSR to identify barriers and solutions to implementing state-level activities,^{5,6} and to incorporate PHSSR into training on the integration of evidence into practitioner decision-making.⁷ Practice-based research networks and other researcher-practitioner partnerships are a promising infrastructure for conducting studies that ask practice-relevant research questions that are readily applied. In addition, NCC is collaborating with key stakeholders, such as AcademyHealth, to ensure that PHSSR is timely and relevant to health policy.

Multidisciplinary collaboration is also fundamental to building PHSSR. For instance, conducting research on public health legislation and legal practices is vital to expanding our understanding of how the public health system works and what can be done to improve it. Several efforts are under way to establish connections between PHSSR and public health law and other relevant fields. RWJF, NCC, AcademyHealth, the National Network for Public Health Institutes, the Public Health Practice Based Research Network (PBRN) National Coordinating Center, and the *Public Health Law Research* program (PHLR) provide support to researchers and practitioners through technical assistance, investigator awards, and research resources. Resources to assist PHSSR researchers are available on the NCC website at www.publichealthsystems.org.

Additional resources to study how laws and legal practices influence health system performance are available through the PHLR program at www.phlr.org.

The Program

NCC was launched in 2011 to coordinate PHSSR activities for researchers, practitioners and policy-makers, with four major aims:

- build the evidence of what works;
- expand research capacity;
- catalyze the application of research to public health practice and policy-making; and
- expand resources for and visibility of PHSSR.

This call for proposals (CFP) is designed to increase the evidence base and strengthen the pool of researchers conducting PHSSR, by developing the capacity of emerging researchers and attracting senior investigators from other fields. The research mentor model outlined in this CFP is a concerted effort to provide opportunities for junior researchers to establish careers in PHSSR while also expanding the evidence base. Successful proposals will seek to accomplish two purposes: (1) build PHSSR evidence relevant to public health practitioners and policy-makers; and (2) provide support and protected time for an intensive supervised career development experience for junior faculty.

Due to the recent growth in PHSSR, researchers, practitioners, and policy-makers have recognized the need for an updated research agenda to reflect strides made in the field and to uncover new evidence needs. In addition, passage of the Affordable Care Act in 2010 brought new dimensions to anticipated changes in public health and health services delivery. In 2011, NCC worked with the Centers for Disease Control and Prevention (CDC) and RWJF to solicit input from the field and to develop the National Agenda

for PHSSR. The current state of PHSSR was assessed through comprehensive reviews of PHSSR literature, which were then disseminated to members of the research and practice communities for comments. Their input shaped the new agenda, which is being used to guide research funding. Published in a recent special supplement to the *American Journal of Preventive Medicine* and available at www.publichealthsystems.org/research-agenda.aspx, the agenda is organized into four areas related to public health infrastructure:

- Workforce—defining, educating, and training the public health workforce;
- System Structure and Performance—public health systems dimensions, governance, and partnership characteristics; performance management and outcomes; social determinants and health disparities;
- Financing and Economics—public health fiscal analysis, financing and investment; costs, performance, and outcomes; and
- Information and Technology—technologies and outcome measures; methods and health outcomes; translation and dissemination.

Applicants' proposals should address topics described in the agenda and incorporate new ways to connect the public health practice and research communities to expedite the translation of evidence into policy and practice. Preference will be given to proposals that engage public health practitioners and policy-makers through established public health agencies, organizations, and networks, such as:

- public health practice-based research networks;
- prevention research centers and public health training centers;
- clinical and translational science institutes;
- state, local and/or tribal public health agencies;
- nonprofit organizations providing public health services.

Priority will also be given to proposals that address research questions related to the social determinants of health and health disparities, public health service delivery, quality, and population health outcomes.

The Mentored Research Scientist Development Awards aim to support junior investigators in a career-building PHSSR research experience. The awards are designed to enhance researchers' attainment of advanced research skills in PHSSR, and prepare for larger, more complex studies that can be supported by funders, such as the National Institutes of Health, the CDC, and the Agency for Healthcare Research and Quality. Preferred applicants will demonstrate significant research experience, potential to become a major investigator in PHSSR, and a long-term career commitment to PHSSR.

Preference will be given to proposals from junior faculty who have a research or professional doctoral degree in public health or a related discipline and who are based at a higher education institution or other nonprofit or government agency that is capable of providing an intensive, supervised career development experience in PHSSR. Applicants must be supervised by an established PHSSR mentor and have a working relationship with a public health practice mentor. The research mentor should be an active investigator in the area of the proposed research, with demonstrated experience in mentoring junior researchers. Preference will also be given to applicants with PHSSR mentors who are co-located at the same university.

Approximately \$800,000 will be awarded through this opportunity. Up to eight 24-month awards for a maximum of \$100,000 each will be available. RWJF and NCC reserve the right to reduce or cease funding after one year if first-year deliverables are not achieved.

Proposals will need to include demonstrated support by the sponsoring institution through matching funds and protected time for the applicant's research. The awards may be used to support at least 25 percent of the applicant's full-time salary and benefits for 24 months, and the applicant's sponsoring institution will be required to provide additional funding support of at least 25 percent of full-time salary and benefits for the 24-month funding period. The sponsoring institution must provide support for the applicant to devote a minimum of 50 percent of full-time professional effort to conduct the PHSSR project.

Eligibility Criteria

- Applicant organizations must be either public entities or nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or non-functionally integrated Type III supporting organizations. The Foundation may require additional documentation.
- Applicant organizations must be based in the United States or its territories.
- Individual candidates for receipt of award funds must be U.S. Citizens or permanent residents at the time of application and must not be receiving support from other research fellowships/traineeships at the time they begin the program.
- Additionally, individual candidates for receipt of award funds cannot be related by blood or marriage to any Officer* or Trustee of the Robert Wood Johnson Foundation, or be a descendant of its founder, Robert Wood Johnson.

**The Officers are the Chairman of the Board of Trustees; President and CEO; Chief of Staff; General Counsel; Secretary; Assistant Secretary; Treasurer; and Assistant Treasurer of the Foundation.*

continued

Eligibility Criteria (continued)

- Eligible applicants are junior faculty (fewer than seven years since doctorate) with a research or professional doctoral degree in public health or related discipline, with a demonstrated career commitment to PHSSR. At the time of the award, applicants must:
 - hold a primary faculty appointment at an academic institution, or an equivalent position at a research center or government agency that is capable of providing an intensive, supervised career development experience in PHSSR; and
 - demonstrate a career commitment to PHSSR.
- Proposals are encouraged from researchers representing a variety of disciplines, including but not limited to health services management; law; public policy; economics; business administration; organizational behavior; sociology; finance; urban planning; public administration; information and library science; and industrial and systems engineering. Proposals from applicants who have not previously received funding from RWJF are encouraged.

Diversity Statement

Consistent with RWJF values, this program embraces diversity and inclusion across multiple dimensions, such as race, ethnicity, gender, age and disadvantaged socioeconomic status. We strongly encourage proposals in support of individual candidates who will help us expand the perspectives and experiences we bring to our work. We believe that the more we include diverse perspectives and experiences in our work, the better we are able to help all Americans live healthier lives and get the care they need.

Selection Criteria

All proposals will be assessed using the following selection criteria by a committee composed of RWJF staff, NCC staff, and members of the national advisory committee for PHSSR:

- The proposed research goals, hypotheses and expected results are consistent with the *National Research Agenda for PHSSR*, and have the potential to influence public health policy or practice decision-making beyond the community included in the proposed study. The research questions are based on input from public health practitioners, and the project includes innovative approaches for conducting PHSSR in practice settings and disseminating research results.
- The proposed research design and methods are expected to: (1) produce PHSSR evidence with immediate impacts on public health practice; (2) take advantage of existing datasets; (3) create PHSSR datasets for future research studies; and (4) significantly expand the PHSSR evidence base related to public health organization, structure, financing and service delivery, including effects on population health outcomes;
- The applicant organization demonstrates protection for a minimum of 50 percent of the applicant's full-time professional effort devoted to the proposed project for 24 months. The cost of this support will be shared jointly; the RWJF award will provide 25 percent of the support for the researcher, and the applicant's sponsoring institution must provide an additional 25 percent support. Also, the sponsoring organization's environment and resources will support the developmental needs and interests of the applicant, as demonstrated by:
 - coursework and training opportunities in relevant research methods to support skill development for the grantee;
 - adequate resources to support data collection and analysis; and
 - other research support, such as biostatistical and informatics consultation, computing, library research, grant writing and processing assistance, and access to researchers and programmers.

continued

Selection Criteria (continued)

A letter from the dean of the applicant's college is required to demonstrate support.

- The applicant has a PHSSR mentor, preferably on-site, who has demonstrated research expertise and experience, including a successful record of serving as principal investigator on competitive extramural PHSSR and/or health services research funding, and serving as a supervising mentor for junior researchers. The applicant must also have a working relationship with a practice mentor. Letters from the research and practice mentors are required to demonstrate support.
- The applicant provides documentation of their other sources of research support and indicates that they and their mentor have research support from sources other than RWJF. The applicant demonstrates potential to become an independent investigator at the conclusion of the award, with an ability to secure competitive extramural research funding from other sources.
- The proposed project clearly states translation and dissemination activities to inform public health practitioners and policy-makers of the findings, including but not limited to:
 - presenting research at the 2014 and 2015 PHSSR Keeneland Conferences and other public health research presentation venues;
 - preparing a summary of the policy implications of the research and other innovative methods to rapidly disseminate findings to practitioners and policy-makers during the project period;
 - publishing research results in peer-reviewed publications; and
 - evaluating the dissemination strategy.

Evaluation and Monitoring

NCC will have oversight responsibilities for all research funded under this call for proposals. NCC will be in regular communication with the grantees to monitor progress and provide technical assistance. Grantees will be expected to:

- provide progress reports and other information upon request to NCC, and participate in periodic conversations with NCC and RWJF staff about the status of research projects and preliminary findings;
- participate in and provide data to an NCC evaluation to identify barriers to and supports for researcher development and how to successfully reduce impediments to such research, including but not limited to:
 - (1) junior faculty development, (2) adequacy of PHSSR mentoring, and (3) quantitative methods, research skills and special expertise needed to expand the PHSSR evidence base; and
- participate and make presentations at the PHSSR Keeneland Conference each year during the grant award period.

Grantees are expected to meet RWJF requirements for the submission of narrative and financial reports, as well as periodic information needed for overall project performance monitoring and management. NCC may ask principal investigators to participate in periodic meetings and give progress reports on their grants. At the close of each grant, the grantee is expected to provide a written report on the project and its findings suitable for wide dissemination. NCC staff and RWJF staff will work with investigators to communicate the results of the funded projects to scientific audiences, media, policy-makers, public health professionals and other audiences, as appropriate.

Use of Grant Funds

Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of equipment essential to the project. Proposed budgets should include travel expenses of \$1,475 each for the applicant and mentor to present research at the PHSSR Keeneland Conference in Lexington, Ky. in April 2014 and 2015.

In keeping with RWJF policy, grant funds may *not* be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, for political activities, or as a substitute for funds currently being used to support similar activities.

The total salary requested must be based on a full-time 12-month staff appointment. Salaries must be consistent with the institution's established salary structure and the salaries provided by the institution to other staff members of equivalent qualifications, rank, and responsibilities in the department concerned. Fringe benefits are allowable based on the sponsoring institution's rate and the percentage of effort. Other allowable program-related expenses are educational expenses for tuition and fees related to the applicant's development in PHSSR, and other research expenses, such as statistical services, including personnel and computer time. Grant funds may *not* be used for salary for mentors, or secretarial and administrative assistance.

How to Apply

Proposals for this solicitation must be submitted via the RWJF online system. Visit www.rwjf.org/cfp/phssrms2 and use the *Apply Online* link for this solicitation. If you have not already done so, you will be required to register at <http://my.rwjf.org> before you begin the application process.

Please direct inquiries to:
Ann V. Kelly, *project manager*
National Coordinating Center for PHSSR
Phone: (859) 218-2317
Email: PHSSR212@uky.edu

All applicants should log in to the system and familiarize themselves with online submission requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, late submissions will not be accepted.

RWJF does not provide individual critiques of proposals submitted.

This program has a national advisory committee that makes recommendations about grants to Foundation staff. RWJF will make all final grant decisions.

Program Direction

Direction and technical assistance for this program are provided by the National Coordinating Center for Public Health Services and Systems Research, which serves as the national program office located at:

University of Kentucky College of Public Health
111 Washington Ave., Suite 212
Lexington, KY 40536-0003
Phone: (859) 218-2094
Fax: (859) 257-3748
Email: PHSSR212@uky.edu
Website: www.publichealthsystems.org

Responsible staff members at the National Coordinating Center for PHSSR are:

- F. Douglas Scutchfield, MD, *principal investigator and project director*
- Glen Mays, MPH, PhD, *co-principal investigator*
- Cynthia Lamberth, MPH, *co-principal investigator and deputy project director*
- Paul Erwin, MD, DrPH, *co-principal investigator*

Responsible staff members at the Robert Wood Johnson Foundation are:

- Paul Kuehnert, DNP, RN, *senior program officer and team director*
- Naima Wong, PhD, MPH, *program officer*
- James Mendez, *program financial analyst*

**National Advisory
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continued

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Los Angeles, CA

References

1. Mays GP, Halverson PK, et al. (2003). "Behind the curve? What we know and need to learn from public health systems research." *Journal of Public Health Management and Practice* 9(3).
2. Scutchfield FD, Marks JS, et al. (2007). "Public health services and systems research." *American Journal of Preventive Medicine* 33(2): 169–71.
3. Resources on PHSSR evidence are available from the National Coordinating Center for PHSSR at: www.publichealthsystems.org/phssr and from RWJF at www.rwjf.org/publichealth/phssr.jsp.
4. Henry BL, Scutchfield FD, et al. (2008). "Tapping the potential: tackling health disparities through accreditation and public health services and systems research." *Journal of Public Health Management and Practice* 14: 85–7.
5. Dodson EA, Baker EA, et al. (2010). "Use of evidence-based interventions in state health departments: A qualitative assessment of barriers and solutions." *Journal of Public Health Management and Practice* 16(6): E9–15.
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7. Baker EA, Brownson RC, et al. (2009). "Examining the role of training in evidence-based public health: A qualitative study." *Health Promotion Practice* 10(3): 342–8.

Timetable

- **June 4, 2013 (3 p.m. to 4 p.m. ET)**

Optional applicant Web conference call. To attend, please go to https://connect.uky.edu/phssr_mrsd_awards and select *Enter as a Guest*.

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Deadline for receipt of full proposals.*

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Finalists notified.

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Start of grants.

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About the Robert Wood Johnson Foundation

The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation's largest philanthropy devoted exclusively to health and health care, the Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, measurable, and timely change.

For more than 40 years, the Foundation has brought experience, commitment and a rigorous, balanced approach to the problems that affect health and health care. When it comes to helping Americans lead healthier lives and get the care they need, the Foundation expects to make a difference in your lifetime.

For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.

Sign up to receive email alerts on upcoming calls for proposals at <http://my.rwjf.org>.



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