



Robert Wood Johnson Foundation

Public Health Services and Systems Research



2009 Call for Proposals

Brief Proposal Deadline

September 22, 2009

Program Overview

(Please refer to specific sections for complete detail.)

Purpose (page 4)

The Robert Wood Johnson Foundation seeks to expand the evidence base for effective public health policy and practice through investment in *Public Health Services and Systems Research* (PHSSR). PHSSR examines the structure, operation and outcomes of the public health system and the impact of the services it provides on the health of the public.

Eligibility Criteria (page 8)

Governmental public health agencies, nonprofit organizations and academic institutions that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code are eligible to apply. Private foundations as defined under Section 509(a) of the Internal Revenue Code are also eligible to apply. Preference will be given to proposals submitted by governmental public health agencies, nonprofit organizations that work in concert with such agencies, and proposals that involve multidisciplinary teams. Applicant organizations must be based in the United States or its territories at the time of application. Practitioners, researchers and policy-makers may serve as principal investigators. This solicitation seeks to engage new researchers in the field of public health services and systems research. Researchers who are new to the field of PHSSR are encouraged to apply, and first-time applicants will be strongly considered.

Selection Criteria (page 9)

Complete selection criteria can be found on page 9.

Total Awards

- Approximately \$2.4 million is available.
- Up to 12 grants will be awarded through this solicitation.
- Grantees will receive up to \$200,000 each in financial support to be used over a 24-month period.

Key Dates and Deadlines (page 15)

- **September 3, 2009 (1:30 p.m. ET)**—Web conference for interested applicants. Registration is required.
- **September 22, 2009 (3 p.m. ET)**—Deadline for receipt of brief proposals.
- **November 17, 2009**—Applicants notified if selected to submit a full proposal.
- **December 15, 2009 (3 p.m. ET)**—Deadline for receipt of full proposals.
- **April 8, 2010**—Finalists notified.
- **May 1, 2010**—Start of grants.

How to Apply (Page 11)

Only proposals submitted through the RWJF Grantmaking Online system will be accepted. Please direct inquiries to:

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Phone: (504) 301-9854

E-mail: phssr@nnpfi.org

www.nnpfi.org/phssr

Background

To improve population health, better evidence is needed on the quality and effectiveness of public health practice.¹ *Public Health Services and Systems Research* (PHSSR) is a multidisciplinary “field of study that examines the organization, financing and delivery of public health services within communities and the impact of those services on the health of the public.”² PHSSR provides evidence on how to organize and deliver public health services effectively and efficiently and supports the following Robert Wood Johnson Foundation (RWJF) public health strategies:

1. Build the evidence for what works to improve the quality and effectiveness of public health practice and policy.
2. Improve the performance and impact of the public health system—which includes public health agencies, businesses, health and health care organizations, faith-based groups and community advocates.
3. Increase the demand for and the use of public health laws, policies and practices that improve health.

A primary aim of PHSSR is to provide evidence that informs real world decisions made by practitioners, organizations, policy-makers, funders and communities at the local, state and national levels to protect the public’s health and promote healthy communities. PHSSR findings can inform decisions on preparedness, community and clinical prevention, and the management of chronic diseases to promote healthier places to live, work, learn and play.

Over the past few years, PHSSR projects have focused on many aspects of the public health system including: (1) defining its authority, structure, organization and management; (2) identifying the services and resources needed to ensure the system is both effective and efficient; (3) defining workforce competencies and potential benefits of accreditation; and, (4) measuring performance and quality improvement with tools based upon public health’s core functions and essential services.^{3,4}

However, there is a need for more research that links improvements in practice to improvements in health status.⁵ Much of the early PHSSR work focused on descriptive analysis. However, the field is at a point where it needs to generate more inferential and interventional research that can produce findings that can have a real impact on the decisions made by practitioners, funders and policy-makers. In addition, innovative analytical methods such as comparative analysis that support the translation of research into practice should be pursued. This solicitation builds upon previous investments in PHSSR over the past two years and will help further advance the field with the ultimate goal of improving the performance of the public health system and the health of the people it serves.

Purpose

The Robert Wood Johnson Foundation (RWJF) seeks to expand the evidence base for effective public health policy and practice through investment in PHSSR. RWJF is supporting this field of research to improve population health and eliminate health disparities through evidence-based enhancements in the public health system.

The National Network of Public Health Institutes (NNPHI) will serve as the administrative support office (ASO) and facilitate the call for proposals for this program. Approximately \$2.4 million will be awarded for up to 12 grants through this solicitation. Grantees will receive up to \$200,000 each in financial support to be used over a 24-month period.

Priorities:

This award will provide financial support to conduct research addressing the most critical issues facing the nation's public health system. Proposed topic areas should reflect issues of high importance and relevance for the field of public health practice and should be responsive to the interests and information needs of researchers, public health practitioners, policy-makers and other community stakeholders.

The priority areas below provide guidance on the topics of study. Please note that while many of the questions focus on public health agencies, we recognize that the public health system is made up of both governmental and nongovernmental organizations. We are interested in how the public health system interacts and collaborates with agencies and organizations in other sectors including, but not limited to, public works, the justice system, education, transportation and housing. Researchers should consider how their proposed research project will impact minority and disparate populations. Proposals should consider policy implications and the potential for innovative evidence-based public health interventions and solutions.

- **Organizational Structure and Authority.** There is a significant body of research describing the structure and organization of the public health system, however, there is considerable need and demand for research that examines the effect of the organizational structure of governmental and nongovernmental public health agencies on the delivery of services and health outcomes. To this end, we are interested in projects that examine system inputs and processes and can distill the elements that result in the effective service delivery and maximize potential for positive health impacts. We are particularly interested in examining how boards of health and public health laws and ordinances facilitate or hinder the effective delivery of public health services and their impact on population health.
- **Public Health Finance.** Public health finance is a field of study that examines the acquisition, utilization and management of resources for the delivery of public health functions and the impact of these resources on population health and the public health system.¹ Research demonstrates a gap in knowledge regarding system capacity for financial management. We are interested in projects that examine the relationship between financial management, service delivery and population health

outcomes. We are also interested in projects that compare the effects of alternative budgeting systems (i.e., outcome versus output-based accounting) on agency and staff performance.

- **Public Health Department Performance and Quality Improvement and Accreditation.** Many local, state and tribal health departments engage in performance and quality improvement activities to increase the efficiency and effectiveness of the programs and services they provide. Health departments engage in these activities to: (1) maintain or increase the volume and reach of preventive services in the face of budget cuts; (2) improve workforce competency; (3) increase the impact of projects, programs and interventions; (4) change regulations and policies to reduce risk and promote healthy conditions; and, (4) improve community health outcomes. The Public Health Accreditation Board (PHAB), with the endorsement of multiple practice organization partners, is currently developing and implementing a national voluntary accreditation program for state, local, territorial and tribal public health departments (available at www.phaboard.org). The accreditation program will develop performance standards for all health departments to drive continuous quality improvement; increase the efficiency and effectiveness of programs and services; and improve health outcomes in the population served. We will support research that proposes to test this approach by examining the relationship between performance management and quality improvement activities, and the efficiency and effectiveness of health department programs and services. We will also support research that can determine whether the accreditation of health departments drives an increase in quality and performance improvement activities; an increase in efficiency or effectiveness of department programs and services; or improves community health outcomes. For more information on accreditation and the standards please visit the Public Health Accreditation Board Web site at www.phaboard.org/standards.

■ **Evidence-Based Practice and Return on Investment.**

Research on the adoption and diffusion of evidence-based practices (EBP) in public health is very important to the national policy debate around health reform and the role of prevention and wellness activities. We will support research that examines the factors that facilitate or inhibit the adoption of EBPs, such as those found in the *Guide to Community Preventive Services*, from the Center for Disease Control and Prevention, as well as research that examines the economic and health impacts of implementing EBPs versus other interventions. We will also support research that measures the return on the investment (ROI) for public health and community prevention—a critical issue in the health reform debate. From this line of research, we look to learn about the challenges with measuring ROI and to generate tools and methods that the public health field can use to measure ROI.

Data Sources and Methodology:

Depending on the focus of the project, primary data collection may be supported. Projects that propose primary data collection must demonstrate the ability to complete the project as planned within two years; no-cost extensions are unlikely to be considered.

Applicants are encouraged to utilize datasets that lend themselves to studying public health systems and services. Datasets include those collected by the National Association of County and City Health Officials (NACCHO) and the Association of State and Territorial Health Officials (ASTHO) as part of their proposed projects. These data are available by request from each respective organization. In addition, the NACCHO 2008 and the ASTHO 2007 data will be available through the Interuniversity Consortium for Political and Social Research (ICPSR) by May 2010. Please see www.nmphi.org/phssr for detailed information about all data available from these organizations. *Proposals that utilize the National Public Health Performance Standards Program as an outcome measure of performance will not be considered.*

In addition, the PHSSR subset of the National Library of Medicine's Health Services and Sciences Research Resources (www.nlm.nih.gov/nichsr/hsrr_search/) database is a good resource for identification of relevant existing data sources. The PHSSR Reference Library provides a comprehensive listing of published PHSSR research to date. Applicants may also use other datasets that are more appropriate to their research topic such as WestLaw, Lexis/Nexis or StateNet or other legal databases.

Translation:

Proposals should address linkages between science and practice and the translation of those findings into practical applications.^{6,7,8,9} Proposals must include a detailed plan for tailored dissemination of findings to practitioners and policy-makers. Applicants are expected to develop a research brief as soon as findings are available. Innovative strategies for dissemination of practice-oriented findings and policy solutions targeted to a non-research audience are recommended. *Projects that propose peer-reviewed publications as the sole deliverable will not be considered for funding.*

Eligibility Criteria

Governmental public health agencies, nonprofit organizations and academic institutions that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code are eligible to apply. Private foundations as defined under Section 509(a) of the Internal Revenue Code are eligible to apply. We will give preference to proposals submitted by multidisciplinary teams that include governmental public health agencies, nonprofit organizations and/or academic institutions.

Applicant organizations must be based in the United States or its territories at the time of application. RWJF seeks to engage and expand the field of PHSSR researchers. Practitioners, policy-makers and researchers from law, public policy, economics, business administration, organizational behavior,

finance, urban planning, public administration and industrial and systems engineering are especially encouraged to apply to be principal investigators. First-time applicants to this solicitation are encouraged and will be given strong consideration. Projects that include matching grants from other funders are also encouraged.

Selection Criteria

All proposals will be assessed by a committee composed of RWJF staff, ASO staff and a team of multidisciplinary expert reviewers. The following criteria will be used to assess proposals, with emphasis on the first six criteria at the brief proposal stage:

1. The degree to which the findings from the project will improve the performance of the health agency/system.
2. Extent to which the research draws its questions from practice, and the potential for results to inform decisions addressing the most critical issues relating to public health systems.
3. Uniqueness of the project and its potential to improve both the public health system and population health.
4. The appropriateness and feasibility of the methodology (including access to and use of relevant data).
5. Potential for research findings to impact minorities and disparate populations.
6. Project team experience and qualifications (including multidisciplinary partnerships) for conducting the proposed project and the time commitment of the project team participants in relation to the proposed tasks.
7. Plans for translating and disseminating research findings to inform public health practice and policy.
8. Demonstrated track record in public health systems research, health services research, organizational behavior, financing, public health law or economics.

Evaluation and Monitoring

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. Principal investigators may be asked to participate in periodic meetings and give progress reports on their grants.

Progress reports on interim results will be required on a biannual (semi-annual) basis. In addition, the grantee will develop two briefs: one during the first quarter of the project that will include a basic description of and rationale for the project and a summary of the gaps in PHSSR that it will address; and a policy brief, to be developed in the final quarter of the project, that will detail findings from the project, policy/practice implications and recommendations. 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. ASO 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.

RWJF and the ASO will arrange for technical assistance to aid applicants who are awarded grants in achieving their stated aims.

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.

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, or as a substitute for funds currently being used to support similar activities.

How to Apply

All proposals for this solicitation must be submitted only through the RWJF Grantmaking Online system at <http://grantmaking.rwjf.org/phs>.

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

The program will host a Web conference for potential applicants to answer questions about the solicitation, as well as the proposal and selection processes. Participation in this conference is strongly encouraged, but not required. Details and registration information are posted at www.nmphi.org/phssr. Registration is required to participate in the Web conference. Details on the call and how to register can be found at www.nmphi.org/phssr. Applicants will have an opportunity to ask questions during the call. (See Timetable.)

There are two stages in the competitive proposal process: (1) submission of a brief proposal that describes the project and provides a preliminary budget and, *if invited*; (2) submission of a full proposal and a detailed line-item budget for the grant.

Stage 1: Brief Proposals

Brief proposals should be no more than six pages, and should include a brief description of the proposed research, an estimated budget and timeframe, and the qualifications of the principle investigator(s).

Please go to <http://grantmaking.rwjf.org/phs> to submit your brief proposal.

Stage 2: Full Proposals

Selected Stage 1 applicants will be invited by letter or e-mail to submit a full proposal of no more than 15 pages accompanied by a budget and budget narrative.

RWJF does not provide individual critiques of proposals submitted.

For more information on proposal requirements please contact:

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Program Direction

Direction and technical assistance for the Public Health Systems and Service Grants is provided by the National Network of Public Health Institutes, which serves as the administrative support office.

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Responsible staff members at the administrative service organization are:

- Nikki Lawhorn, M.P.P., *research manager*
- Erica Johnson, M.A., *program coordinator*
- Sarah Gillen, M.P.H., *associate director*
- Lianne Brown, Ph.D., M.P.H., *director of Evaluation and Research*

Responsible staff members at the Robert Wood Johnson Foundation are:

- James S. Marks, M.D., M.P.H., *senior vice president and director, Health Group*
- Michelle Larkin, J.D., M.S., R.N., *team director and senior program officer*
- Debra Perez, Ph.D., *senior program officer, Research and Evaluation**
- Joe Marx, *senior communications officer*
- Thomas Andruszewski, *grants administrator*
- Linda Manning, *program team coordinator*

* *Primary program officer responsible for this solicitation.*

Endnotes

1. Scutchfield FD, Marks JS, Perez DJ, et al. "Public Health Services and Systems Research." *American Journal of Preventive Medicine*, 33(2), 169–171, 2007.
2. Mays GP, Halverson PK and Scutchfield FD. "Behind the Curve? What We Know and Need to Learn From Public Health Systems Research." *Journal of Public Health Management Practice*, 9:179–82, 2003.
3. Preston MA. "Reducing Cancer Disparities Through Community Engagement in Policy Development: The Role of Cancer Councils," at Keeneland Conference, April 2009, Lexington, KY. Proceedings of the meeting available at www.publichealthsystems.org/media/file/Preston.pdf.
4. Chen Z, Roy K and Crawford C. "Obesity Prevention: The Impact of Local Health Departments," at Keeneland Conference, April 2009, Lexington, KY. Proceedings of the meeting available at www.publichealthsystems.org/media/file/Chen.pdf.
5. Mays G. *The Current State of Public Health Systems & Services Research*. Yale Public Health Systems and Services Research Conference, Washington, DC: June 11–12, 2008. Proceedings of the meeting available at <http://publichealth.yale.edu/yphssr/>.
6. Public Health Finance Home. Center for Public Health Systems and Services Research Web site, 2009. Available at www.publichealthsystems.org/phf.
7. Kalmuss D and Armstrong B. "Service-Based Research: Linking Public Health Research and Practice to Improve the Quality of Public Health Programs." *Journal of Public Health Management Practice*, 14(1), 62–65, 2008.
8. Arrington B, Kimmey J, Brewster M, et al. "Building a Local Agenda for Dissemination of Research Into Practice." *Journal of Public Health Management Practice*, 14(2), 185–92, 2008.
9. Remington P. "Translating Research Into Practice," Yale Public Health Systems and Services Research Conference, June 11–12, 2008, Washington, DC. Available at <http://publichealth.yale.edu/yphssr/>.

Timetable

- **September 3, 2009 (1:30 p.m. ET)**
Informational Web conference for interested applicants. Registration is required. Details and registration information are posted at www.nnphi.org/phssr. Interested applicants will have an opportunity to ask questions during the call.
- **September 22, 2009 (3 p.m. ET)**
Deadline for receipt of brief proposals.
- **November 17, 2009**
Applicants notified if invited to submit a full proposal.
- **December 15, 2009 (3 p.m. ET)**
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Finalists notified.
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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 improving the health and health care of all Americans, we work with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change.

For more than 35 years we've brought experience, commitment and a rigorous, balanced approach to the problems that affect the health and health care of those we serve. When it comes to helping Americans lead healthier lives and get the care they need, we expect to make a difference in your lifetime.

For more information visit www.rwjf.org.

Sign up to receive e-mail alerts on upcoming calls for proposals at
www.rwjf.org/services.



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