



Your AHRQ Grant Is Ending: What's Next?

Kristie Kiser
Claire Gibbons, PhD, MPH
Terry Field, DSc
Edith Burns, MD
Barbara Lund, MBA, MSW

July 12, 2011

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Agenda

- Welcome
 - Barbara Lund, AHRQ NRC TA Lead, Massachusetts eHealth Collaborative
 - Vera Rosenthal, AHRQ NRC, Junior Service Fellow
- Grantee Introductions
- Format for Today's Session
 - Working with OCKT to disseminate findings
 - Establishing partnerships: Presentations by the Robert Wood Johnson Foundation, AHRQ grantees, and the Technical Assistance team
- Discussion

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Today's Presentation

Your AHRQ Grant is ending: What's Next?

Facilitator: Barbara Lund, MBA, MSW, AHRQ NRC TA Team, Massachusetts eHealth Collaborative

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Today's Objectives

- Hear from OCKT on how they can help grantees disseminate findings as their projects come to a close
- Assist grantees with considering opportunities and identifying resources for continuing their research project or application/intervention
- Identify external resources to help market/disseminate and/or implement research products and tools
- Encourage grantees to think creatively about establishing partnerships for research dissemination and implementation, beyond AHRQ, as their project is ending
- Share experiences and recommendations amongst each other

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Grantee Introductions

- Name, Organization, Project PI
- Note any questions regarding establishing partnerships or marketing/disseminating the health IT applications or interventions developed during your grant

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- Kristie Kiser - Strategic Planner for Health IT, Office of Communications and Knowledge Transfer, AHRQ
 - Working with OCKT to Disseminate Findings
- Claire Gibbons, PhD, MPH - Senior Program Officer, Research and Evaluation, Robert Wood Johnson Foundation
 - Establishing Partnerships: How Partnerships Are Established
- Terry Field, DSc, Meyers Primary Care Institute, U Mass Medical School, *and*
- Edith Burns, MD, Medical College of Wisconsin
 - Establishing Partnerships: Beyond AHRQ Grants - Experiences in Partnering to Continue Dissemination and Implementation of Health IT Research
- Barbara Lund, MBA, MSW – Project Director, Massachusetts eHealth Collaborative, AHRQ NRC TA Lead
 - Partnerships, Dissemination and Funding Opportunities

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Kristie Kiser

Working with OCKT to Disseminate Findings

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Why Communicate?

- To reach key audiences credibly
- To help the public understand our work
- To share lessons learned with colleagues in the field
- To generate more support for our research

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We're Here to Help!

- OCKT can assist in:
 - Identifying audiences
 - Developing messages
 - Articulating stories
 - Preparing for interviews
 - Writing (opinion pieces, fact sheets, etc.)
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Journal Articles

- Article accepted? Congratulations!
- Email: journalpublishing@ahrq.hhs.gov
- AHRQ will collaborate on dissemination with researchers and journals
- Possible vehicles:
 - Press release or media pitch
 - AHRQ electronic newsletters
 - Research activities
 - GovDelivery

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Why Engage the Media?

- Promoting your work improves health care
- Media is a great tool IF you use it right
- Engaging the media helps control the message

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Got Research?

So you've got the media's interest...

What happens now?

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Who Are The Media?

- Trade Press
 - Independent (e.g. Modern Healthcare)
 - Association-sponsored (AM News)
- General Press
 - Newspapers
 - Magazines
 - Wire Services
 - Television/Radio
- Media is happening in new ways
 - Blogs, Twitter and more

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Health Reporters: “When you’ve met one, you’ve met one”

- Health and medical issues are increasingly complex
- Shrinking news rooms/Broader coverage areas
- Greater competition
- Faster news cycles – Internet
- The New Breed: Bloggers, Tweeters
- Association of Health Care Journalists

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Establishing Partnerships

- *How Partnerships are Established: Overview of RWJF's Work and Funding Opportunities*
 - Claire Gibbons, PhD, MPH

- *Beyond AHRQ Grants: Experiences in Partnering to Continue Dissemination and Implementation of Health IT Research*
 - Terry Field, DSc
 - Edith Burns, MD

- *Partnerships, Dissemination and Funding Opportunities*
 - Barbara Lund, MSW, MBA

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Claire Gibbons, Ph.D., M.P.H.

Robert Wood Johnson Foundation

Overview of RWJF's work and funding opportunities

Claire Gibbons, Ph.D., M.P.H.

Robert Wood Johnson Foundation

Overview of RWJF's work and funding opportunities



Presentation Topics

- Overview of RWJ
- RWJ focus areas and how we work with grantees
 - Opportunities for partnership
 - Funding opportunities
- Dissemination/Partnership examples

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Mission and Philosophy of RWJF

- To improve the health and health care of all Americans
 - Seven areas of focus including: Quality/Equality Coverage, Human Capital, Pioneer, Public Health, Vulnerable Populations, Childhood Obesity
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Quality/Equality

- To achieve high quality, equitable, patient centered care in targeted communities by 2015
- Aligning forces for quality
- Opportunities for partnership
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Coverage

- To achieve stable and affordable health insurance coverage for 95% of all Americans by 2020
- Support expansion of existing programs, provide TA to states to get ready for health reform implementation
- Funding opportunity: Changes in Health Care Financing and Organization

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Public Health

- To build a stronger public health system that creates evidence for what works, collaborates with a range of partners, and then puts ideas into action
 - Learning what works to improve health
 - Advancing smarter laws and policies
 - Strengthening public health departments

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Human Capital

- Preparing health professionals for leadership, with a special focus on increasing diversity
- Scholars and Fellows programs
 - <http://www.rwjfleaders.org/programs>
- Scholars and Fellows resources
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Pioneer

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AHRQ Grantees

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Terry Field, DSc

Meyers Primary Care Institute
University of Massachusetts Medical School

What Was Next for Us?
Experiences Following AHRQ Grants

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Paths We Have Taken

- Followed up observational studies with RCT's of interventions
 - Observational study of adverse drug events in nursing homes followed by a series of AHRQ funded randomized trials of CPOE with alerts
 - Observational study of warfarin-related adverse drug events in nursing homes followed by a randomized trial of SBAR
 - Observational study of adverse drug events in ambulatory setting followed by proactive risk reduction grant followed by three studies of health IT-based interventions

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Paths We Have Taken

- Disseminated materials developed during the grant
 - Added components to obtain ability to grant CE credits for nurses
 - Offered to the AHRQ CERT group for posting on their web site (chainonline.org)
 - Current use statistics:
 - 9526 views
 - 1683 nursing CEU certificates as of April 2011
 - 20 referring URLs

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- Worked closely with dissemination experts and integrated their approaches into our studies
- Engaged one of our investigators in national dissemination efforts to ensure that we are up-to-date on techniques
- Possible examples include:
 - <http://www.re-aim.org/>
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Paths We Have Taken

- Encouraged adoption of tested interventions
 - Internal
 - Prepared for sustaining interventions at the beginning of the study
 - Ensured that critical internal staff with behind the scenes knowledge were integrated into the process
 - External
 - Multiple publications and presentations from each study
 - Careful consideration of most useful journals and meetings
 - Participation in relevant national groups
 - Found users with directly parallel health IT systems

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Paths We Have Taken

- Constantly search for potential funding sources to support dissemination, including NIH as well as AHRQ and foundations
 - [PA-09-071](#) Health Services Research Demonstration and Dissemination Grants (R18) - AHRQ
 - [PAR-10-038](#), [PAR-10-039](#), [PAR-10-040](#) Dissemination and Implementation Research in Health (R01, 21, 03) NIH
 - [PAR-10-114](#) Research Dissemination and Implementation Grants (R18) NHLBI
 - [PAR-11-120](#) Research Demonstration and Dissemination Projects (R18) - NIAID

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Path We Probably Should Take!

- **2011 Training Institute on Dissemination and Implementation Research in Health**
 - August 1-5, 2011 at Chapel Hill
<http://conferences.thehillgroup.com/OBSSRinstitutes/TIDIRH2011/>
 - No fee
 - Requirements:
 - Hold a doctoral level degree
 - Have demonstrated experience and expertise in health science
 - Have a D&I research concept to bring to the institute and develop throughout the week
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Edith Burns, MD

Medical College of Wisconsin
Division of Geriatrics
Patient Centered Outcomes Research Group

What Was Next for Us?
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Paths We Have Taken: Clinical Themes

- People manage chronic illness at home: things go wrong!
- Practitioners often don't know what patients are doing.
- Is there a better way to develop/guide patient self-management?

Need: an integrative model incorporating health IT so patients can better match demands of disease and treatment within and outside the home!

- Theme enriched and focused by contacts in community:
 - Department on Aging
 - Forest County Potawatomi Tribe
 - FlexTech Systems

← **T2DM**

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Paths We Have Taken: Initial Partnerships & Projects

- NIA SBIR (National Institute on Aging: Small Business Innovation Research) feasibility study: self-management of T2DM
 - Home-based, automated system
 - Reminders to measure glucose, take medication
 - Individualized
 - Limited feedback
 - Recruited through Department on Aging (DOA)
 - Low-income elderly, sedentary
 - System fitted daily routine of participants
 - Required actions highlighting an “objective” measure of disease – blood glucose

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Paths We Have Taken: Evolution

- AHRQ-funded randomized trial of refined system
 - Theory-based, fuzzy logic algorithm to interpret self-monitored blood glucose
 - Individualized
 - Still home-based
 - Still with limited feedback
- Recruitment through VAMC, academic, community-based primary care, DOA
 - Younger , busier, fewer medical conditions, higher A1c

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Successes, Challenges, Lessons Learned

■ Successes

- Recruitment
- Initial trial - worked because participants with simpler management routines, home in am
- Partnerships
 - Serendipity – technical expertise
 - Relationships with community organizations

■ Challenges

- “Fallible” technology
 - System failures (daylight savings time; physical connection to devices)
 - Feedback limited, no visual component
- Participant issues
 - Younger - not everyone stays home all day!
 - Limited engagement with “computer” technology
 - More life stress

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Paths We Have Taken for the Future

- Needs
 - More current, reliable technology
 - Mobility
 - Incorporate & track physiological data
 - Integrate clinicians
- Contacted other AHRQ Grantees
- Expand ties with local experts
- Participant Feedback
 - Real-time feedback = MOBILITY
 - Visual capability
 - Expanded feedback/advice
 - Ubiquity of cell phones

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Paths We are Taking: Developing and Extending Partnerships

- Medical College of Wisconsin Clinical Informatics
 - Access to protected website
 - Access to EHR
- Milwaukee School of Engineering
 - Education & research collaborative
 - Mobile phone applications
- University of Wisconsin-Milwaukee
 - Exercise physiology
- Monitor needs of existing partners
 - T2DM remains a priority; other chronic illness
 - Tools for community case managers

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Other Paths We are Taking

- Pilot funding through Clinical Translational Science Institute
 - Smart phone application and web interface
 - Integrate real-world, patient self-management into EHR
- “Low-tech” approaches to further understanding and effecting change in patient behavior
 - Rutgers & Network for the Study of Health Behaviors
 - Extending focus group discussions, themes
 - ❖ “Experts” vs. poor control
 - ❖ Clinician inertia
 - ❖ Overlay of depression in chronic illness

Need: better qualitative research approach to find out how/what patients learn, and how to teach them more effectively!

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Potential Funding Sources

- Sources of funding to support further implementation
 - AHRQ
 - NIA
 - VHA: Health Services Research & Development; Quality Enhancement Research Initiative
 - Chronic disease, e-Health, long-term care, informatics
 - Private Foundation
 - Forest County Potawatomi Community Foundation

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Barbara Lund

Partnerships, Dissemination and Funding Opportunities

Barbara Lund

Partnerships, Dissemination and Funding Opportunities



Approaches for Partnerships

- Activities for identifying and creating partnerships are similar to targeting traditional media outlets and include:
 - Leverage local organizations such as health plans, practices, institutions, and non-profits/associations when possible
 - Research their priorities, goals, and current programs
 - Identify the appropriate point of contact, use your networks to facilitate introductions
 - Create a “pitch” for why your project would benefit them and/or their members or beneficiaries – help them understand the benefits
 - Communicate
- In some cases, these efforts may just result in additional mechanisms to disseminate your application or intervention without additional funding; in other cases you may be able to “create” an opportunity for an organization to provide you with a grant
- In the future when starting a project, consider identifying some of these partnership opportunities up front and include them in your project so the dissemination and partnership piece becomes a natural follow-on

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Approaches for Dissemination

- Publishing is only one of many ways to disseminate research tools, interventions and findings
 - Offer to do talks and lectures at academic institutions, specialty societies, relevant conferences
 - Example: NYeC Digital Health Conference (December 1 -2) - NYeC is seeking special session proposals that showcase HIT innovations, use case studies and/or evidence of empirical findings, new IT tools, practical application of tools, and advances in HIT. Deadlines are July 29th! For more information: <http://www.digitalhealthconference.com>
 - Create videos of your research project for posting on your organization's web site
 - Consider working with organization's marketing and communications department
 - May obtain funding from other organizations for dissemination purposes
 - Proactively work with local media outlets with a focus on relevant local 'angles' for your research story
 - AHRQ OCKT offers media training and messaging
 - Ensure your students and colleagues know about your research – they may spread the word for you!
 - Pursue poster session opportunities at conferences

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Approaches to Dissemination

- When publishing your research results in the following journals, consider the following:
 - Peer-reviewed journals
 - Carefully select journals where there is a good “fit”; e.g. the primary focus of the journal closely aligns with your research
 - Be sure your material is generalizable (this is one of the most common reasons articles are not accepted for publication)
 - Carefully review the Instructions to Authors to ensure your submission is seriously considered
 - Follow-up with the editors if you have questions about why your submission was not accepted
 - “Second-tier” journals
 - Specialty journals are often seeking articles on relevant topics
 - May do an op-ed or ‘spotlight’ piece in their journal
 - PubMed Central
 - Be sure to get your articles into PubMed as quickly as possible

Remember to always contact AHRQ once your article has been ACCEPTED!!!

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Health IT Applications/Intervention Opportunities

Sample

Organization Name / Type	Background	Current Opportunities	Health IT Applications and Interventions											
			PHR	Decision Support	EHR	Care Transition Tools	Patient and Clinical Reminders	Discharge Process	Patient Education Tools	Health Literacy Tools	Medication Management	eRx	Error Detection and Alerts	Quality Measures and eMeasures
Health Information Technology Research Center (HITRC)	The HITRC is a collaborative portal which provides numerous resources to support entities and individuals involved with the HITECH Act.	The Learning Center welcomes posting of tools and resources for a wide range of HIT topics. Access is limited to those involved with ONC programs: contact your local REC, State HIE or Beacon Grant project to obtain a login. http://hitrc-collaborative.org/confluence/dashboard.action	X	X	X	X	X	X	X	X	X	X	X	X
AAFP (American Academy of Family Physicians)	AAFP's mission is to preserve and promote the science and art of Family Medicine and to ensure high-quality, cost-effective health care for patients of all ages.	AAFP has numerous tools and resources online. Grantees can network with members through the AAFP online community, conferences and discussion listserv. Small grants are offered to support research of value to the practicing family physician, with the current priority focus being Patient Centered Medical Home. http://www.centerforhit.org/online/cht/home.html		X			X		X	X				
ACP (American Academy of Physicians)	The ACP Foundation focuses on improving health communication by addressing the problem of low health literacy.	ACP has numerous tools and resources online for providers and patients. Grantees can network with members through the ACP's online community, conferences and discussion listserv. Opportunities for partnership are offered to develop tools, which may be posted online. http://www.acponline.org/clinical_information/		X	X		X		X	X				X

Health IT Applications/Intervention Opportunities (1 of 4)

This slide displays a data table (1 of 4) of Health IT/Applications/Intervention Sample Opportunities with columns for the Organization Name/Type, Background, Current Opportunities, and Subcategories for Type of Support.



Health IT Application/Intervention Opportunities

Sample

Organization Name / Type	Background	Current Opportunities	Health IT Applications and Interventions												
			PHR	Decision Support	EHR	Care Transition Tools	Patient and Clinical Reminders	Discharge Process	Patient Education Tools	Health Literacy Tools	Medication Management	eRx	Error Detection and Alerts	Quality Measures and eMeasures	
eHealth Initiative (eHI)	eHI represents multiple and diverse stakeholders who are improving healthcare through the use of Health Information Technology (HIT).	eHI accepts research papers and tools on numerous health IT topics for posting and distribution. Membership is required for access to some tools and resources. http://www.ehealthinitiative.org/	X	X	X	X	X	X	X	X	X	X	X	X	X
American Hospital Association: Health Research and Educational Trust	The principal activities of RHET focus on identifying, exploring, demonstrating, and evaluating key strategic health care issues affecting innovative health care delivery systems, educating the field about the implications of changing health policies and developing strategies for community health improvement.	AHA: RHET offers ongoing partnership opportunities for organizations and researchers to collaborate on joint initiatives and to post relevant tools for members. There is also opportunity for research partnerships. http://www.hret.org/					X			X					X

Health IT Application/Intervention Opportunities (2 of 4)

This slide displays a data table (2 of 4) of Health IT/Applications/Intervention Sample Opportunities with columns for the Organization Name/Type, Background, Current Opportunities, and Subcategories for Type of Support.



Health IT Application/Intervention Opportunities

Sample

Organization Name / Type	Background	Current Opportunities	Health IT Applications and Interventions												
			PHR	Decision Support	EHR	Care Transition Tools	Patient and Clinical Reminders	Discharge Process	Patient Education Tools	Health Literacy Tools	Medication Management	eRx	Error Detection and Alerts	Quality Measures and eMeasures	
American Medical Association (AMA), AMA Foundation	The AMA helps doctors help patients by uniting physicians nationwide to work on the most important professional and public health issues. Seeking new tools for physicians to manage their practices	The AMA posts numerous tools and resources online to assist physicians and patients. Grantees may partner with AMA to offer relevant tools and research products. The AMA Foundation offers small grants for programs including online tools to promote health for patients, through their Healthy Living Grant Program. http://www.ama-assn.org/ama/pub/physician-resources.page		X		X	X		X						X
International Patient Decision Aid Standards (IPDAS) Collaboration	Researchers, practitioners and stakeholders from around the world collaborate to establish an internationally approved set of criteria to determine the quality of patient decision aids.	Researchers may submit and review criteria for Patients or other individuals who are making a health decision. Tools and other patient decision aids may be submitted for consideration. http://ipdas.ohri.ca/index.html		X			X								
HIMSS (Healthcare Information and Management Systems Society)	HIMSS is a cause-based, not-for-profit organization exclusively focused on providing global leadership for the optimal use of information technology (IT) and management systems for the betterment of healthcare.	HIMSS is a membership organization that posts tools and numerous resources on their website. There are numerous opportunities for involvement and partnership via committees, the annual conference online educational webinars and local chapter meetings. www.himss.org/	X	X	X	X	X	X	X	X	X	X	X	X	X

Health IT Application/Intervention Opportunities (3 of 4)

This slide displays a data table (3 of 4) of Health IT/Applications/Intervention Sample Opportunities with columns for the Organization Name/Type, Background, Current Opportunities, and Subcategories for Type of Support.



Health IT Application/Intervention Opportunities

Sample

Organization Name / Type	Background	Current Opportunities	Health IT Applications and Interventions											
			PHR	Decision Support	EHR	Care Transition Tools	Patient and Clinical Reminders	Discharge Process	Patient Education Tools	Health Literacy Tools	Medication Management eRx	Error Detection and Alerts	Quality Measures and eMeasures	
Society of Hospital Medicine	SHM focuses on issues impacting hospitalists and hospitalized patients. partners with AHRQ and other organizations to further research for hospitalized patients	SHM offers numerous tools online and may partner with grantees to promote research products. They also off some research opportunities on topics related to hospitalization. research opportunities. http://www.hospitalmedicine.org/				X	X					X		
The Center for Improving Medication Management	The Center educates clinicians and their staff on the best approaches to implementing prescribing technology and integrating it with the day-to-day workflow.	The Center works on projects that demonstrate the value of pharmacy interoperability with both patients and physicians for the purpose of improving the medication management process. The Center offers numerous tools online and may partner with grantees to promote research products. http://www.thecimm.org/		X							X	X		X
American Society of Health-System Pharmacists	ASHSP offers an online resource center that provides ASHP members with tools, references, and recommendations as well as ideas and examples of success stories and lessons learned.	ASHSP partners with researchers on relevant tools and research products. http://www.ashp.org/				X					X	X		

Health IT Application/Intervention Opportunities (4 of 4)

This slide displays a data table (4 of 4) of Health IT/Applications/Intervention Sample Opportunities with columns for the Organization Name/Type, Background, Current Opportunities, and Subcategories for Type of Support.



Additional Opportunities

Sample

- Additional partnership, dissemination, or funding opportunities could include:

Organization/Name Type	Background	Opportunities
Non-Profit/Corporate Opportunities		
Local Health Plan/Insurance Exchanges	Determine if they have any current programs that you could leverage or provide value based on your intervention	Conduct research on local plans to determine if there are any current programs where there is a match with your project or create your own match based on what you know the plans would like to achieve for their members.
Blue Cross Blue Shield Foundation	The BCBS foundation works with public and private organizations to broaden health coverage and reduce barriers to care. It focuses on developing measurable and sustainable solutions that benefit uninsured, vulnerable and low-income individuals and families in the Commonwealth.	Visit the BCBS chapter in your state as they each have their own unique priorities and focus areas.
Corporate Foundations	Many corporations with a vested interest in the technology or outcomes may have grant opportunities worth pursuing	Examples of corporate foundations could include: <ul style="list-style-type: none"> Health IT vendors, Hospitals, Insurance companies
Foundation for Informed Medical Decision Making	The Foundation for Informed Medical Decision Making sponsors research to expand the understanding of how to improve decision support and decision quality in health care. Research is focused on health literacy tools, decision support, and patient and clinical interactions.	Potential funding opportunities include provision of financial support for doctoral candidates, post-docs, and clinical fellows to conduct research on shared decision-making. http://www.informedmedicaldecisions.org/information_for_investigators.html
Robert Wood Johnson Foundation	RWJ seeks to improve the health care of all Americans. In 2010, approximately \$300 million in grants was awarded and fell within seven program areas: <ul style="list-style-type: none"> Childhood Obesity, Coverage, Human Capital, Pioneer, Public Health, Quality/Equality, Vulnerable Populations Note: Health IT is included across these opportunities.	Future Calls for Proposals include: <ul style="list-style-type: none"> RWJ Foundation and Health & Society Scholars (July 2011 – Human Capital) RWJ Foundation Scholars in Health Policy (July 2011 – Human Capital) RWJ Foundation Community Health Leaders (August 2011 – Human Capital) http://www.rwjf.org/applications/solicited/cfplist.jsp

Additional Opportunities

This slide displays a data table of sample additional opportunities that include columns for Organization Name Type, Background, and Opportunities.



Traditional Government Funding Opportunities

Sample

Organization	Description	FOA Link
Federal Government	<p>AHRQ Health Services Research Demonstration and Dissemination Grants (R18) This Funding Opportunity Announcement (FOA) solicits Large Research Demonstration and Dissemination (R18) Projects, and expresses AHRQ portfolio priority areas of interest for these ongoing, extramural grants. Current Expiration Date: January 8, 2012 Program Announcement #: PA-09-071</p>	<p>http://grants.nih.gov/grants/guide/pa-files/PA-09-071.html</p>
AHRQ	<p>AHRQ Researching Implementation and Change While Improving Quality (R18) AHRQ has an interest in supporting grants to rigorously study the <i>implementation</i> of quality improvement strategies and provide generalizable scientific findings about the implementation of the quality improvement strategy, related organizational changes, and their impact. The research funded through this announcement may be conducted by the team designing/ implementing the quality improvement strategy or it may be conducted by a separate team. The quality improvement strategy must be one that is expected to result in major improvements in health care delivery that will enhance patient outcomes. Research design and execution will yield results providing AHRQ, providers, patients, payers, policymakers, and the public with contextual details and high level of confidence about what works and what doesn't in improving health care in the United States. Current Expiration Date: May 12, 2012 Program Announcement #: PAR-08-136</p>	<p>http://grants.nih.gov/grants/guide/pa-files/PAR-08-136.html</p>
	<p>AHRQ Partnership in Implementing Patient Safety II (R18) The objective of this FOA is to support health care institutions in implementing safe practice interventions that demonstrate evidence of eliminating or reducing medical errors, risks, hazards, and harms associated with the process of health care. Current Expiration Date: January 8, 2013 Program Announcement #: PAR-10-22</p>	<p>http://grants.nih.gov/grants/guide/pa-files/PAR-10-022.html</p>

Traditional Government Funding Opportunities

This slide displays a data table (1 of 2) of Traditional Government Funding Opportunities with columns for Organization, Description, and FOA Link.



Traditional Government Funding Opportunities

Sample

Organization	Description	FOA Link
Federal Government		
NIH	NIH Dissemination and Implementation Research in Health (R01 and R21) This Funding Opportunity Announcement (FOA) encourages investigators to submit research grant applications that will identify, develop, and refine effective and efficient methods, structures, and strategies to disseminate and implement research-tested health behavior change interventions and evidence-based prevention, early detection, diagnostic, treatment, and quality of life improvement services into public health and clinical practice settings. Current Expiration Date: January 07, 2013 Program Announcement #: PAR-10-038	http://grants.nih.gov/grants/guide/pa-files/PAR-10-038.html
	National Institute on Drug Abuse: Integration of Drug Abuse Prevention and Treatment in Primary Care Settings (R01) Efforts to prevent, detect, and treat drug abuse and addiction and its consequences can be improved by integrating existing evidence-based approaches into primary care settings. NIDA solicits translation and implementation research project applications to identify the most effective strategies and service delivery models for accomplishing this goal. Application Due Date: October 31, 2011, by 5:00 PM	http://grants.nih.gov/grants/guide/rfa-files/RFA-DA-12-008.html

Traditional Government Funding Opportunities

This slide displays a data table (2 of 2) of Traditional Government Funding Opportunities with columns for Organization, Description, and FOA Link.



Additional AHRQ Resources

- Current AHRQ Funding Opportunities
 - <http://www.ahrq.gov/fund>

- Current AHRQ Health IT Portfolio Funding Opportunities and Other Resources
 - http://healthit.ahrq.gov/portal/server.pt/community/funding_opportunities/655

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Discussion

- We welcome your comments and questions
- Reminder: press *6 to mute; press * 7 to un-mute
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Final Comments

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 - Will be distributed to all Webinar participants
- Evaluation Form
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Panelist Bios

Kristie Kiser

Kristie Kiser is a Strategic Planner for Health IT in AHRQ's Office of Communications and Knowledge Transfer, where she has worked since 2001. The Office of Communications and Knowledge Transfer (OCKT) promotes the communication of information to both internal and external customers. It designs, develops, implements, and manages programs for disseminating and implementing the results of Agency activities with the goal of changing audience behavior. Prior to her work with AHRQ's health IT portfolio, she managed communication activities for AHRQ's Prevention and Care Management portfolio. Prior to joining AHRQ, Ms. Kiser worked at VHA, Inc., Baylor Health System and the American Cancer Society, where she directed strategic communication initiatives for those organizations.

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Panelist Bios

Claire Gibbons, Ph.D., M.P.H.

Claire Gibbons is a Senior Program Officer, Research and Evaluation at the Robert Wood Johnson Foundation. Dr. Gibbons manages research and evaluation programs for the Foundation's efforts in improving health care quality, and the work in its Pioneer Portfolio. Drawn by the Foundation's "commitment and passion to quality health and health care," she views RWJF's strong policies and programs for families and communities as closely aligning with her expertise in maternal and child health. Since joining the Foundation in 2007, Gibbons has primarily focused on research and evaluation of the Foundation's regional approach to improving the quality of health care for patients with chronic conditions such as diabetes, asthma, depression and heart disease. She also serves as program officer for the evaluation of Aligning Forces for Quality, a national program to support community coalitions to work toward high quality, patient-centered and equitable care.

Previously, Gibbons was project coordinator for an RWJF-funded study, Substance Abuse Needs and Services for Families Involved in the Child Welfare System, at the University of North Carolina at Chapel Hill, School of Social Work. She also served as research assistant for the National Survey of Child and Adolescent Well-Being. Gibbons also has held teaching assistant positions at the University of North Carolina at Chapel Hill, School of Public Health and the University of Rochester, New York.

She has written and presented in the areas of child welfare services, substance abuse, child victimization, diabetes, and end-of-life care.

Gibbons earned a Ph.D. from the School of Public Health, University of North Carolina at Chapel Hill, an M.P.H. from the University of Rochester, New York, and two B.A. degrees, in economics and in health and society, from the University of Rochester.

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Panelist Bios

Terry Field, D.Sc.

Terry S. Field, D.Sc. is an epidemiologist and health services researcher who serves as the Associate Director of the Meyers Primary Care Institute and an Associate Professor at the University of Massachusetts Medical School. Her research focuses on provision of care to disabled and elderly patients in the ambulatory and long-term care settings. She has participated as a principal investigator or co-investigator on a series of grants from NIA and AHRQ related to patient safety including a number of randomized trials of HIT-based interventions to improve prescribing and monitoring of medications. Her research interests also include provision of care to cancer patients with a special interest in survival deficits for patients at risk of receiving less than optimum care, including elderly patients and members of minority groups. She has been a member of the Steering Committee of the NCI-funded HMO Research Network's Cancer Research Network for 12 years and co-leads the Scientific and Data Resources Core.

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Panelist Bios

Edith Burns, M.D.

Associate Professor of Medicine, Division of Geriatrics; Associate Professor of Population Health-Epidemiology; Director Ambulatory Geriatrics, Zablocki VA Medical Center; Member, Patient Care Outcomes Research (PCOR) Group, Medical College of Wisconsin, Milwaukee, WI.

Dr. Burns completed her BS at Wellesley College, Wellesley, MA, MD at the University of Wisconsin School of Medicine, Madison, WI, a Behavioral Medicine Fellowship at Mount Sinai Medical Center, Milwaukee, WI, and a Geriatrics and Immunology Fellowship at the Medical College of Wisconsin. She was the Program Director of the Geriatrics Fellowship at MCW, and designed and directed the combined Medicine-Geriatrics Residency Program from 1998 through 2006.

Her expertise is in the area of geriatrics and internal medicine, with a research focus on health behavior, illness beliefs and perceptions about disease as these relate to chronic illness and self-management. For the past several years her research team has been actively studying patient's common sense models of illness, self-management behaviors in type 2 diabetes, and how these beliefs and behaviors relate to disease control, adherence, functional status, and quality of life in older adults. Other studies are focusing on how community-based care providers (e.g. RN case managers) assess and advise patients in their home settings about self-management of chronic illness. She has also worked with the common sense model of illness in the study of dementia caregivers, and how perceptions and beliefs about the disease relate to caregiver stress. Dr. Burns has over 50 peer-reviewed publications and chapters.

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Barbara Lund, M.B.A., M.S.W.

Barbara Lund is a Project Director at the Massachusetts eHealth Collaborative. She served as a Senior Pilot Executive where she led one of MAeHC's community pilot projects, overseeing community implementation of EHRs and HIE. She was responsible for coordination of stakeholders and vendors, strategic planning, physician and community engagement and project troubleshooting.

Ms. Lund is currently the Technical Lead for AHRQ's Health IT project, in conjunction with Booz Allen Hamilton. She is responsible for providing support to Health IT research grantees nationally, and designing and running numerous webinars on health IT research topics for grantees. She also led the New York Regional Extension Center Program efforts for MAeHC and is currently leading the New Hampshire Health Information Exchange project.

Ms. Lund earned a master's degree of clinical social work from Smith College and an MBA from Simmons School of Management. Ms. Lund has held positions with electronic health record and personal health record vendors, healthcare payer organizations, in medical practice management and clinical practice settings.

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Key Resources

- AHRQ National Resource Center for Health IT
 - <http://www.healthit.ahrq.gov>
- AHRQ Points of Contact
 - Vera Rosenthal, vera.rosenthal@ahrq.hhs.gov
- AHRQ NRC TA Team
 - Erin Grant, Kai Carter, Julia Fitzgerald: Booz Allen Hamilton; grant_erin@bah.com; carter_nzinga@bah.com; fitzgerald_julia@bah.com
 - Barbara Lund and Rachel Kell: Massachusetts eHealth Collaborative, NRC-TechAssist@AHRQ.hhs.gov

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