**October 2014**

**PHAST related studies underway**

1) WA PHAST Finance

a. project is basically done and being wrapped

b. involved looking at LHD-specific expenditures in MCH, Food Safety/Sanitation, and CD Control

c. included 5 states: WA, FL, NY, MN, OH

d. got some compelling findings re MCH & Food Safety/Sanitation

e. wrapping up re CD Control

2) MPROVE

a. This involved 6 states and standardized data collection re CD Control, EH, and Chronic Dse services by county

b. Practice and academic partners were Co-PIs for each state grant and this project is “officially” done for the initial MPROVE phase

c. We at PHAST are working w/ the WA data as well as (the just recently-received) MPROVE data from the other 5 states and are putting together some descriptive visualizations to display soon and w/ some iterative, collaboration from/with practice partners

4) MCH “Positive Deviant LHDs”

a. This study is led by Tamar Klaiman (a junior investigator in Philadelphia). She has a “mentored PHSSR scientist” research award and I am her “mentor.

b. As a follow on to PHAST Finance (above), and w/ empirical data we have re MCH (for WA, NY, FL), we identified “Positive Deviant LHDs” that had much better than expected MCH outcomes, given other characteristics that for other LHDs has generally undermined their outcomes. She is doing case studies w/ these handful of LHDs in each state.

6) ”PHAST 2.0”

a. We were funded by RWJF to expand the uptake (additional states) and stick (integration into state systems) of the adoption of the well-vetted (by practice partners in the 6 MPROVE states) standardized PH service delivery measures (EH, CD, Chr Dse)

b. We/PHAST will be doing more work w/ the former MPROVE states to refine these measures and work out MPROVE-related kinks, at the same time that we are working w/ states eager to adopt/develop data collection activity around PH services

7) DIRECTIVE is the new grant awarded by RWJF re cross-jurisdictional sharing

a. Justin Marlowe (University of WA), is heading this up as PI

b. This will include WA, WI, NY, and OR

c. It has a focus on examining the nature, value, outcomes produced through various levels/types of cross-jurisdictional sharing

**OTHER RELEVANT STUDIES**

8) WA DACS (Delivery and Cost Studies)

a. Jennifer Tebaldi and I are Co-PIs and Justin Marlowe is a very key co-Investigator (w/ his STRONG local gov’tl financing background)

b. This project aligns w/ the WA FPHS costing work underway and will provide some additional specificity and analytic fire-power to understanding cost/unit of service, cost drivers, and how variation relates to resource allocation.

c. This study won’t be completed until Dec 2015

9) PH/Primary Care Integration

a. This is led by the MN PBRN and involves WA, WI, MN, and CO

b. This is a marriage between each state’s PH PBRN and Primary Care PBRN, so I am the co-PI for WA along w/ Laura-Mae Baldwin who is WA Co-PI in relation to her role w/ WA’s Primary Care PBRN. (So this is a great way that we PBRNs are getting to know each other!)

c. The object of this MN-led study is to examine the nature of the “integration” activity between primary care and PH agencies at the community-level…what that looks like, what are the characteristics, how is it done, etc. Ultimately this 3 year grant (we are ~8 months in) will try to develop a measure of “degree/level of integration”.

**SUBMITTED/PENDING**

10) “*Local Public Health Services, Delivery System Capital, and Health Disparities.”* NIH R01 application

This research will leverage the recent economic recession, slow recovery, implementation of ACA as context for observing change in and estimating the influence of LHD services and public health delivery system capital on health disparities. Using a longitudinal cohort design, we will examine whether changes in LHD services and delivery system capital are related directly to health outcomes, as well as how they may moderate relationships between disparities in health for disadvantaged minority and rural communities.