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Georgia health policy center scholarship: A review and five-year strategic plan for research 2018 Progress Report

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Georgia Health Policy Center Scholarship: A Review and Five-Year Strategic Plan for Research 2018 Progress Report

Research Overview

For more than 20 years, the Georgia Health Policy Center (GHPC) has lived its mission of integrating research, policy, and programs to advance health and well-being. It is at the intersection of the problem-solving and research cycles that the center sees its greatest opportunity to contribute both to practice and to academia. GHPC remains actively committed to further increasing its research output and strengthening its research partnerships across the Georgia State University community and beyond.

In 2015, GHPC completed its strategic research assessment and resulting Research Strategic Plan. The center's executive leadership team — the CEO and directors — have primary responsibility for the implementation of the plan.

The Research Strategic Plan has three major areas of focus: capacity, infrastructure, and financial strategy. Each area has specific action steps. But, broadly:

- Research capacity will be increased through expanded research faculty appointments, strategic engagement with faculty from other academic or research units, development of research-focused staff mentorship, and alignment of GHPC research growth with other college and university strategic initiatives.
- Research infrastructure will be strengthened by encouraging a focus of publication efforts toward the revised target journal list, clarifying and promoting scholarship goals for existing staff and new hires, and promoting a culture of research through recognition of research productivity.
- Research financial strategy will include examining the use of limited GHPC funds to incentivize staff research productivity and seeking research grants to support applied research projects tied to our programmatic work.

Through 2020, the center will work with staff and partners to implement these actions and measure annual progress toward achievement of the overarching goals. What follows is a report on progress made during calendar year 2018. In the last quarter of 2020, GHPC will undertake another comprehensive assessment. This will result in publication of the next volume of the five-year strategic research plan (2021-2025) for release in early 2021.

2018 Steps Toward Fulfillment of GHPC's Five-Year Research Plan

Research Capacity

GHPC is committed to expanding its research capacity over this five-year period by taking steps at all personnel levels: students, staff, and faculty. The ultimate goal of expanding research capacity is to increase the percentage of published peer-reviewed papers that are directly related to project work. In order to increase opportunities for school and university collaboration, GHPC will expand the use of research faculty appointments for center staff most interested in research leadership and production.

2018 accomplishments in the area of building research capacity included:

- Clarifying and reinforcing expectations for research productivity through the development of career ladders for research staff. (See Table 1.)
- Expanding engagement with centers and faculty throughout Georgia State University.
- Defining the role of affiliated faculty, both internal to Georgia State University and at external universities. (See Table 2 for the definition of affiliated faculty and counts as of December 2018.)
- Meeting with leadership of graduate programs throughout Georgia State University (public health, social work, psychology, and economics) for preliminary discussions of how to expand graduate student participation in GHPC research.
- Working with 20 graduate research assistants in calendar year 2018. Additionally, Glenn Landers, Karen Minyard, and Angela Snyder are participating on four dissertation committees through the departments of Public Management and Policy, Economics, and Computer Information Systems.
- Aligning GHPC research capacity with the Andrew Young School's strategic priorities through active planning and participation in Dean Wallace's Policy in the Digital World initiative, as well as the Child Policy Lab.
- Karen Minyard and Leigh Alderman taught the Ph.D.-level course Using Research to Develop Health Policy (PMAP 9211) in spring 2018.

- Expanding participation in GHPC’s monthly research seminar aided efforts for broadening mentoring in research. Participation included representatives from the Bridging for Health, Medicaid, community health systems development, and behavioral health teams, as well as directors, affiliated faculty, and early-career GHPC researchers. Additionally, the structure of the monthly research meeting was revised to organize around project teams’ publication pipelines.

Table 1: Research-Related Career Ladder

Position Title	Knowledge Creation and Dissemination
Project Director	Leads teams and individuals in research capacity development, develops team and individual policy/practice dissemination capacity, and has an individual portfolio of research practice to include at least seven in any of the following: poster and abstract submission and presentations, policy briefs, reports and/or resource tool and training development, peer-reviewed journal articles and/or contribution to book chapters
Associate Project Director	Leads teams and individuals in research capacity development, develops team and individual policy/practice dissemination capacity, and one individual portfolio of research practice to include at least seven in any of the following: poster and abstract submission and presentations, policy briefs, reports and/or training development, peer-reviewed journal articles and/or contributions to book chapters
Assistant Project Director	Leads as senior member of research teams and may develop individual research and dissemination initiatives that may include seven in any of the following: poster or abstract submission and presentations, policy briefs, reports, resource tool and training development, peer-reviewed journal articles and/or contributions to book chapters
Senior Research Associate	Serves as senior member of research teams and may develop individual research and dissemination initiatives that may include five of the following: poster or abstract submission or presentations, policy briefs/reports and resource tool and training development, peer-reviewed journal articles and/or contribution to book chapter
Research Associate II	Provides support to research team and may develop individual research and dissemination initiatives that may include three of the following: poster or abstract submissions and presentations, policy briefs/reports and/or resource tool and training development
Research Associate I	Provides support to research team and may develop individual research and dissemination initiatives that may include one of the following: poster or abstract submissions or presentations, policy briefs/reports or resource tool and training development
Research Coordinator II	Supports project teams or competency areas in knowledge creation and dissemination
Research Coordinator I	Supports project teams or competency areas in knowledge creation and dissemination

Table 2: Affiliated Faculty Meeting New Definition

Affiliated faculty is broadly defined as any faculty (at Georgia State University or an external university) that have collaborated with GHPC for research, teaching, or publishing within the past three years. Based on this new definition, as of December 2018, GHPC works with a total of 34 affiliated faculty across six universities.

University	Number of Affiliated Faculty
Georgia State University	
Andrew Young School of Policy Studies	4
College of Arts & Sciences	1
J. Mack Robinson College of Business	2
College of Law	5
Byrdine F. Lewis College of Nursing and Health Professionals	2
School of Public Health	8
Total Georgia State University-affiliated faculty	22
Albert Einstein College of Medicine	1
Augusta University	3
Emory University	6
Georgia Southern University	1
University of Kentucky	1
Total affiliated faculty from external universities	12

Research Infrastructure

The building of research infrastructure at GHPC will ultimately be addressed through hiring, and through research recognition and incentivization. In 2018, the center made progress toward this goal:

- GHPC formally reinforced expectations for research productivity through development of the career ladder for research staff. (See Table 1.)
- GHPC peer-reviewed publications were communicated in the Andrew Young School's *Policy News in the ATL* (formerly *Dean's E-news*) and promoted on the GHPC website, social media, partner newsletters, and through other university communications channels, as appropriate. In addition, poster presentations were presented during our annual internal Summer Poster Series designed to highlight research dissemination and enhance knowledge sharing.
- Leadership approved a plan to strengthen the culture of celebrating research at GHPC through the following three methods (implementation will begin in calendar year 2019):

- At staff meetings, those who published or presented peer-reviewed research in the past month will present a one-slide, one-minute overview of their work to staff. This serves to both increase recognition and to facilitate knowledge transfer within GHPC.
- Weekly office door art recognition. Those who recently published will have a golden pen placed on their door and those presenting will have a golden megaphone on their door.
- A bulletin board display in the breakroom will highlight photos of staff with recently published/presented research in front of their door art, along with the citation of their work.

Financial Strategy

Progress in the areas of research capacity and infrastructure can be accelerated by a financial strategy that supports academic research output, while keeping in mind that GHPC is currently funded primarily through grants and contracts. For 2018, GHPC continued to align its financial strategy with its Research Strategic Plan:

- Research remains a core focus of the directors' role. For directors with academic faculty appointments, funds buy out part of their time for research activities. Specifically, GHPC funds support 10% of Glenn Landers' time for research, the School of Social Work supports 10% of Ann DiGirolamo's time, and Public Management and Policy continues to fund 25% of Angie Snyder's time.
- GHPC established a goal of submitting two research-focused grants per year. In calendar year 2018, GHPC exceeded this by submitting six research grants and receiving two. Please note that submissions and grant decisions may or may not occur in the same year.
- The management team and executive team are considering options for incentivizing research using GHPC's limited discretionary funds.

About the Georgia Health Policy Center

GHPC provides evidence-based research, policy analysis, and translational services for communities and decision-makers. The center focuses on solutions to complex issues facing health care today, including behavioral health, child health and well-being, community health systems development, global health, health and health care financing, health in all policies, health system transformation, long-term services and supports, population health, and rural health. GHPC works at the local, state, and

national levels to improve health at the community level. Today, GHPC is at work throughout Georgia and in more than 200 communities in all 50 states, helping communities achieve health improvement.

GHPC by the Numbers

23 years of service

64 staff members

Works in 50 states, and globally in 4 countries

70+ active contracts

~100 diverse clients

(Based on calendar year 2018)

Staff

With growth in the number of contracts and projects the center has undertaken, there has been continued growth in center staff. The size of GHPC has more than doubled over the past 10 years, from 24 staff members in 2011 to 64 at the end of calendar year 2018.

GHPC Funding

In fiscal year (FY) 2018, GHPC received approximately \$10.7 million in external funding from 70 active grants and contracts. The vast majority of the center's funding (94%) comes from sponsored awards. The FY 2018 mix is consistent with the center's recent funding history. The sponsored funds are used to complete the awarded projects' goals and objectives, while the funding that comes from university and state contributions is used for the center's nonsponsored project work, including salary support.

GHPC by the Numbers

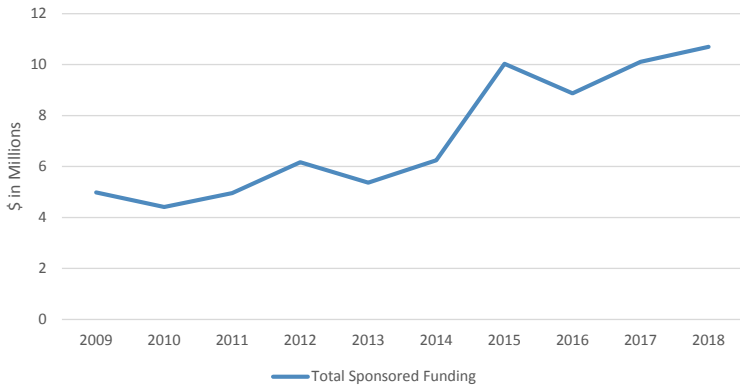
\$10.7 million in new external funding in the last year,

representing 9% of all external for the university

(Based on FY 2018)

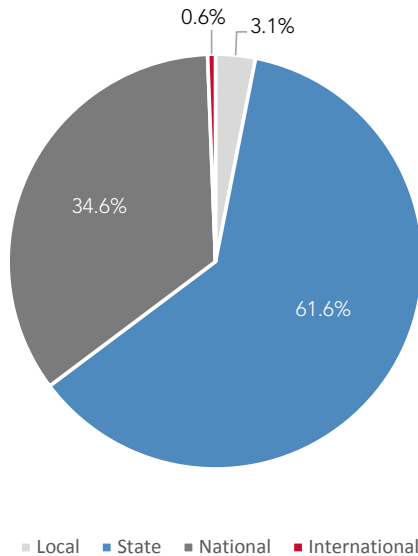
GHPC's sponsored funding has grown from nearly \$5 million in 2009 to \$10.7 million in FY 2018.

Figure 1: Sponsored Funding, 2009-2018



Sponsored revenue is received from both public agencies and private partners. The funders also represent a mix of local, state, national, and, to a lesser degree, international sources.

Figure 2: Sponsored Revenue by Funder Type, FY 2018



GHPC Research Output

The following breakdown of research output reflects continued documentation of the center’s research activities. In the appendix there is a full list of GHPC peer-reviewed publications from 2018. Table 3 illustrates total research-related outputs between 2006 and 2018.

Table 3: Number of Peer-Reviewed Publications, Presentations, Posters, 2006-2018

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Publications*	0	4	3	2	4	4	4	6	12	9	16	19	16
Podium Presentations	+	+	+	17	20	16	6	27	22	24	22	35	46
Poster Presentations	+	+	+	12	15	13	11	12	17	18	16	12	10

*Publications include both peer-reviewed journal articles and book chapters.

+ Data collection on presentations and posters began in 2009.

There is ongoing interest in evaluating the relationship between GHPC contracts and publications. Of the 16 peer-reviewed articles published 2018, seven publications (43.8%) were tied to a GHPC grant or contract. This suggests that GHPC staff members are not completely reliant on grants to produce research ideas.

Table 4: GHPC Peer-Reviewed Publication Behavior, 2010-2018

	2010	2011	2012	2013	2014	2015	2016	2017	2018
Total Publications	4	3	4	6	12	9	16	19	16
Publications from Contracts	2	2	2	5	7	6	12	4	7
Publications With Faculty Co-author	2	2	0	1	2	5	2	5	7
Publications on Target Journal List	1	1	1	2	2	4	2	4*	3*

*The target journal list was revised in 2018.

The ratio of contract to noncontract publications remained relatively steady over this period, until 2017, when a higher than average percentage of publications were from staff involvement in research outside of their core GHPC work. In 2018, the ratio moved back to close to half of publications being associated with a contract. The publications without contracts in 2018 reflect a larger percentage of publication contributions from faculty co-authors. Some contracts are associated with more publications than others.

Table 5: GHPC Grants and Contracts Associated With Peer-Reviewed Publications, 2010-2018

Contracts Associated With 3 or More Publications	Contracts Associated With 2 Publications	Contracts Associated With 1 Publication
Atlanta Regional Collaborative for Health Improvement (4)	Health Law Partnership	Colorado Health Foundation
GA Department of Community Health (10)	Healthcare Georgia Foundation	Health Resources and Services Administration
National Network of Public Health Institutes (3)	GA Department of Public Health	Interdepartmental agreement with the School of Public Health
Philanthropic Collaborative for a Healthy Georgia (3)	GA Department of Behavioral Health and Developmental Disabilities	GA Governor's Office of Children and Families
U.S. Centers for Disease Control and Prevention (7)	REDHHTT	National Maternal Child Health Workforce Development Center
	Robert W. Woodruff Foundation	RTI International

Next Steps

The following actions are planned for 2019 in each of the three focus areas.

Research Capacity

- GHPC will monitor implementation of expectations for research productivity and measure performance against these expectations in performance evaluations for research staff.
- Engagement with graduate students will continue to be tracked and reported annually, including progress toward the annual goal that at least two published papers per year will include GHPC-engaged graduate students as co-authors.
- GHPC will continue to monitor and expand research activity with affiliated faculty.

- The center will identify opportunities to align GHPC research capacity growth with the Andrew Young School's strategic aims and other university-level strategic initiatives.

Research Infrastructure

- GHPC will consider the new research productivity expectations in hiring of new staff.
- GHPC will pursue additional faculty appointments for select staff.
- GHPC will implement enhancements to building a culture of research recognition.
- The monthly research group will develop a comprehensive strategic plan, including how best to use agenda time and who should attend which meetings.

Financial Strategy

- GHPC will continue to submit at least two research grants a year.
- Leadership will identify potential incentives for research productivity among staff, including examination of its current, limited funds in residual, indirect, and university accounts to leverage client-oriented projects for publication and dissemination.

Appendix: 2018 GHPC Peer-Reviewed Journal Articles and Book Chapters

* denotes that the publication has an affiliated faculty co-author

Attell, B. K., Cappelli, C., Manteuffel, B., & Li, H. (2018). Measuring functional impairment in children and adolescents: Psychometric properties of the Columbia Impairment Scale (CIS). *Evaluation & the Health Professions*, 1-27. **No contract**

Calancie, L., Anderson, S., Branscomb, J., Apostolico, A., Lich, K. (2018). Using behavior over time graphs to spur systems thinking among public health practitioners. *Preventing Chronic Disease*, 15(6), 1-8. **National Maternal Child Health Workforce Development Center**

*Courtemanche, C., Marton, J., Ukert, B., Yelowitz, A., & Zapata, D. (2018). Effects of the Affordable Care Act on health behaviors after 3 years. *Eastern Economic Journal*, 1-27. **No contract**

*Courtemanche, C., Marton, J., Ukert, B., Yelowitz, A., & Zapata, D. (2018). Effects of the Affordable Care Act on health care access and self-assessed health after 3 years. *Inquiry*, 55. **No contract**

*Courtemanche, C., Marton, J., Ukert, B., Yelowitz, A. and Zapata, D. (2018), Early effects of the Affordable Care Act on health care access, risky health behaviors, and self-assessed health. *Southern Economic Journal*, 84: 660-691. **No contract**

*Courtemanche, C., Marton, J. H., Ukert, B., Yelowitz, A., Zapata, D., Fazlul, I. (2018). The three year impact of the Affordable Care Act on disparities in insurance coverage. *Health Services Research*. <https://doi.org/10.1007/s40615-018-0522-x> **No contract**

*Fasano, R. M., Meyer, E. K., Branscomb, J., White, M. S., Gibson, R. W., & Eckman, J. R. (2018). Impact of red blood cell antigen matching on alloimmunization and transfusion complications in patients with sickle cell disease: A systematic review. *Transfusion Medicine Reviews*, 1-12. **REdHHoTT**

Gonzalez-Casanova, I., Stein, A., Barraza-Villareal, A., Feregrino, R., DiGirolamo, A., Hernandez-Cadena, L., Rivera, J., Romieu, I., Ramakrishnan, U. (2018). Prenatal exposure to environmental pollutants and child development trajectories through 7 years. *International Journal of Hygiene and Environmental Health*, 221(4), 616-622. **No contract**

Grinshteyn, E. G., Xu, H., Manteuffel, B., Ettner, S. L. (2018). The associations of area-level violent crime rates and self-reported violent crime exposure with adolescent behavioral health. *Community Mental Health Journal*, 54(3), 252-258. **No contract**

Hall, W. J., Erausquin, J. T., Nichols, T. R., Tanner, A. E., & Brown-Jeffy, S. (2018). Relationship intentions, race, and gender: Student differences in condom use during hookups involving vaginal sex. *Journal of American College Health*, 1-10. **No contract**

Landers, G., Price, K., & Minyard, K. (2018). Developmental evaluation of a collective impact initiative: Insights for foundations. *The Foundation Review*, 10(2), 80-92. **Colorado Health Foundation**

Lawler, K., Landers, G., Minyard, K., Fuller, K., & Branscomb, J. (2018). Using Dynamic Systems Modeling to Advance Common Agendas. In *Using Collective Impact to Bring Community Change*. Routledge. **ARCHI**

Minyard, K., Smith, A.T, Turner, R., Milstein, B., Solomon, L. (2018). Community and programmatic factors influencing effective use of system dynamic models. *System Dynamics Review*, 34, 154-171. **No contract**

*Mobley, L. R., Kuo, T.-M., Zhou, M., Y, R., Seth, M., Julia, K. (2018). What happened to disparities in CRC screening among FFS Medicare enrollees following Medicare modernization? *Journal of Racial and Ethnic Health Disparities*. <https://doi.org/10.1007/s40615-018-0522-x>
Interdepartmental agreement with the School of Public Health

*Singleton, A., Spratling, R. (2018). A strategic planning tool for increasing African American blood donation. *Health Promotion Practice*, 1-8. **REDHHoTT**

Smart, A., Minyard, K. (Dec. 13, 2018). Moving work on social determinants of health from health funders to health funder partnerships. *Health Affairs Blog*. Retrieved from <https://www.healthaffairs.org/doi/10.1377/hblog20181211.887431/full/> **Duke Endowment and Healthcare Georgia Foundation**

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