Implementation Science Center for Cancer Control Equity

Pilot Grant Request for Applications Orientation March 9, 2023



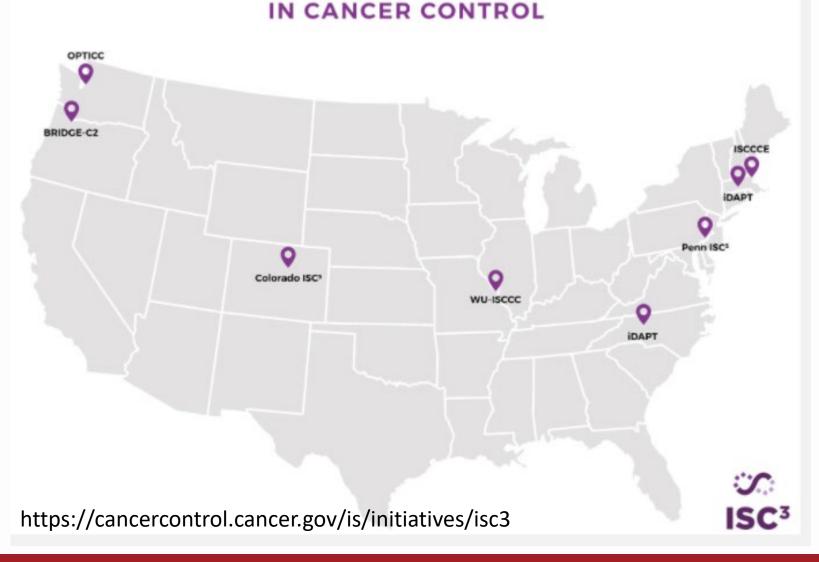
What is Implementation Science?

• IMPLEMENTATION SCIENCE aims to accelerate the adoption and integration of evidence-based practices, interventions, and policies into routine health care and public health practice to improve the impact on population health



ISC³ Overview

- Funded by the NCI Moonshot Initiative
- Combines infrastructure development, and pilot research
- Priority placed on networking and crosscenter collaboration



IMPLEMENTATION SCIENCE CENTERS

ISCCCE Overview

Our Grand Challenge

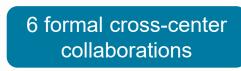
Address the inequitable implementation and limited scale of EBIs aimed at narrowing health inequities and advance methods that consider the low-resource, complex nature of CHCs, where adaptation and cost-effective solutions are needed most.

• Our Partner

Massachusetts League of Community Health Centers

- Our Work
 - 9 Implementation pilots
 - 9 Methods pilots
 - 2 Diversity supplements and LRP awards
 - 6 doctoral students/post-doctoral fellows
 - 9 cross-center collaborative activities
 - 23 CHCs in Learning Community
 - 18 CHCs in pilots, representing 254,000 patients







What we are trying to accomplish

- Create robust partnerships with community health centers (CHCs) to learn how to speed their ability to integrate evidence-based programs into care delivery
- Align our resources to build an infrastructure for on-going implementation studies that will improve health equity
- Answer key questions from CHCs and their community partners to improve uptake of evidence-based practices



Types of Pilot Studies & Examples

Pre-Implementation



Clinical–Community Partnerships for Cancer Prevention Equity Project Lead: Bekka Lee



Implementation



Implementation of Paired Promotion of Colorectal Cancer Prevention and Social Needs Screening Project Leads: Sanja Percac-Lima & Jennifer Haas

Methods



Development and Feasibility of Methods for Stakeholder and Equity Data-Driven Implementation in Cancer Control and Prevention

Project Leads: Kelly Aschbrenner & Steve Bartels

ISCCCE Leadership & Collaborators



Karen Emmons, PhD

Professor, Department of Social & Behavioral Health, Harvard TH Chan School of Public Health

Faculty Lead, Community Engagement Program, Harvard Catalyst



Elsie Taveras, MD, MPH

Chief Community Health Equity Officer, Mass General Brigham

Executive Director, Kraft Center for Community Health at MGH

Conrad Taff Endowed Professor, Harvard Medical School



Susan Dargon-Hart

Senior Vice President, Clinical Health Affairs, Mass League of Community Health Centers



CHC Context in Massachusetts



Our Laboratory Partner: Massachusetts League of Community Health Centers



✓ Primary Care Association: 52 Health Centers

✓ 300 + sites

- ✓ Supported nearly 18,700 full-time jobs (2018)
- ✓ Generate over \$2 billion in savings for the Commonwealth
- Long-standing partnership with Azara HealthCare



Massachusetts Community Health Centers

- ✓ Serve more than one million patients
- ✓ 83% at or below 200% poverty
- ✓ 61% of patients identify as racial or ethnic minority
- ✓ Speak more than 50 languages; 35% best served in language other than English

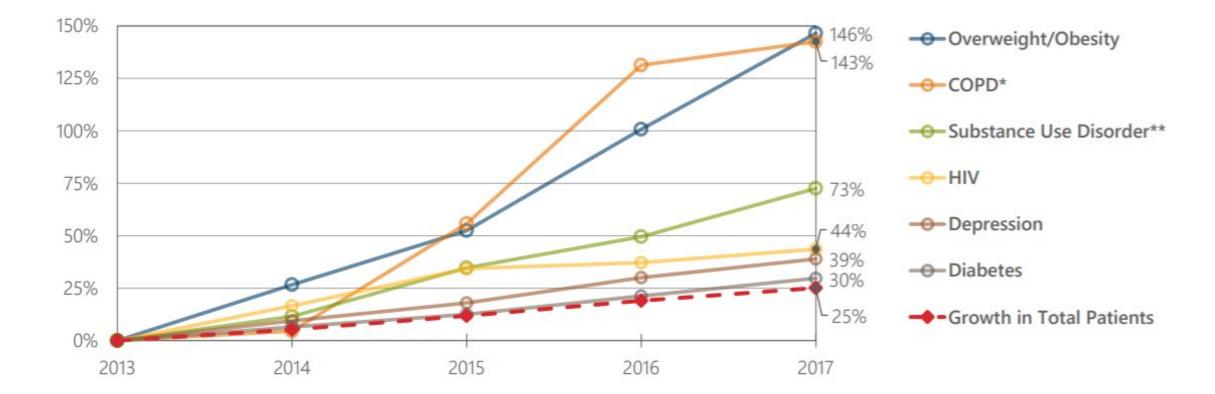
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- ✓ Are disproportionately low-income, publicly insured or uninsured
- ✓ Need assistance navigating the health care system



Health Center Patients are Growing Increasingly Complex, With Higher Rates of Chronic Conditions than in Previous Years Percent Growth in Health Center Patients Diagnosed with Selected Chronic Conditions, 2013 - 2017



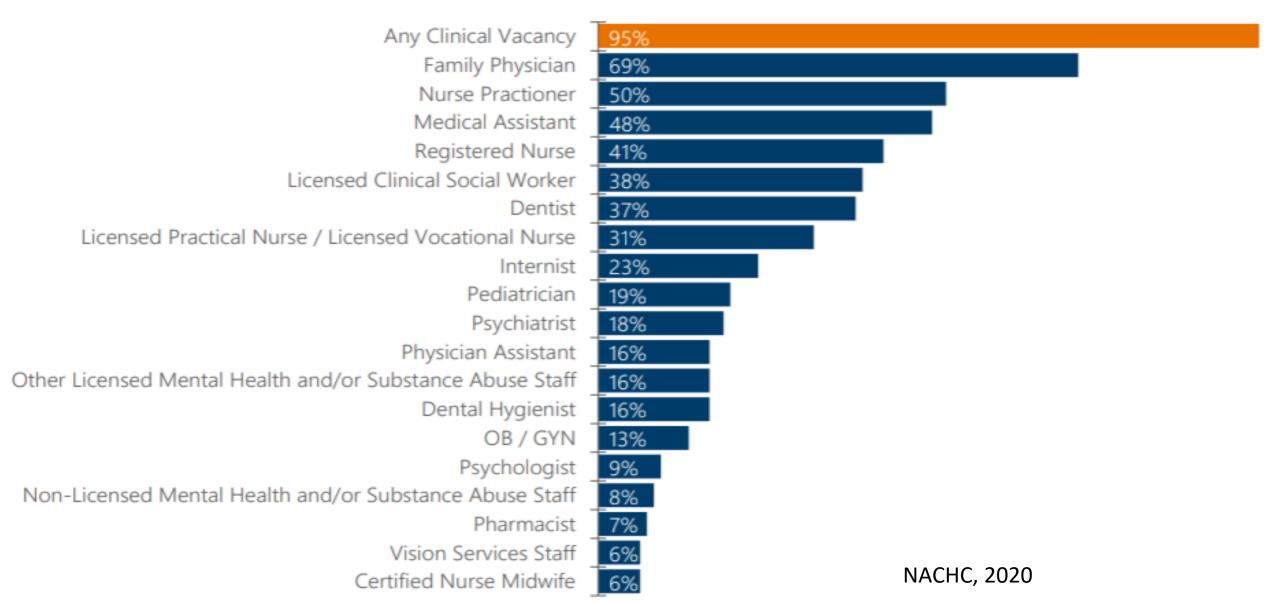
* COPD = chronic obstructive pulmonary disease

** Excludes tobacco and alcohol use disorders

Source: National Association of Community Health Centers. Health Centers are Providing Care to Growing Numbers of Patients with Complex Needs. May 2019. Available from http://www.nachc.org/research-and-data/research-fact-sheets-and-infographics/

Health Centers Experience Difficulty Recruiting Many Clinical Staff

Percent of Health Centers Reporting a Vacancy for Specific Clinical Positions



ISCCCE Structures & Supports



Mass League Team

- Supports efforts to build satisfying, productive bi-lateral partnerships between the researchers and health center teams
- Facilitates connections with community health centers for pilot participation and partnerships, authorship opportunities, and more
- Sits on review committees for pilot applications, publication proposals
- Oversees a practice surveillance survey, which is conducted at the end of a pilot and aims to:
 - Better understand CHC experiences participating in ISCCCE research pilots
 - Ensure that future research partnerships are productive and beneficial to CHCs





Susan Dargon-Hart, LICSW Senior Vice President, Clinical Health Affairs



Leslie Salas Karnes, MPH Manager, Public Health Initiatives



Diana Erani, MBA Senior Vice President, COO

I-Lab / Implementation Team

- Works closely with the partnering community health centers to support their pilot study implementation efforts and build capacity
- Leads an Implementation Learning Community made up of MA CHCs
 - Live in-person/virtual sessions
 - Implementation Learning Community Connections, a Canvas site that includes short videos, modules, and discussion boards
- I-lab will assist pilot investigators to:
 - Operationalize CHC study activities
 - Develop communication plans with CHC teams
 - Coordinate pilot study activities with other center elements including other pilots, learning community, capacity building, and practice surveillance
 - Support implementation strategies





Gina Kruse, MD, MPH Director



Maddie Davies, MPH Senior Project Manager



Stephanie Martinez, BS Clinical Research Coordinator

Methods Unit / Implementation Research Methods Incubator (IRMI)

 Address methodologic challenges in implementation centered on health equity with pragmatic approaches to implementation

IRMI will consult with pilot investigators to:

- Operationalize and measure health equity
- Make study design choices aligned with setting
- Conceptualize novel methods to advance health equity within implementation science

Special topics of interest:

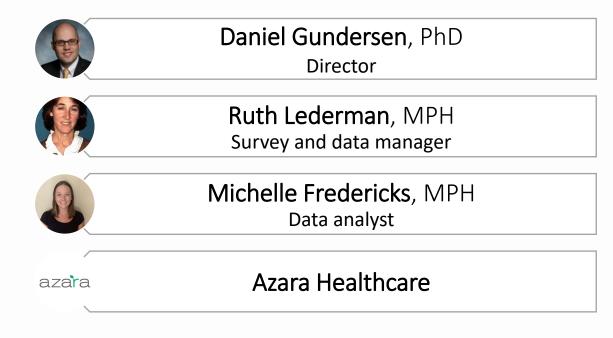
- Low burden methods for conducting research in CHC settings
- Methods for rapid cycle testing in CHC settings
- Pragmatic processes for engaging patients in CHC implementation research





Data & Evaluation Ecosystem

- Connect research, clinical, and community-level data so that ISCCCE productivity and pilot study outcomes data can be effectively collected and evaluated
- Integrate outer context data with inner setting, patient characteristics, and other data collected by pilot studies
- Build a robust data ecosystem for learning across pilot studies to implement innovative approaches in future pilot studies
- Evaluation Unit will assist pilot investigators by:
 - Providing data management & analytic support



ISCCCE Pilot Grant RFA



RFA Timeline

Key Activities	Dates
Applications Open	March 1, 2023
Orientation Webinar: 3-4 p.m. March 9, 2023	March 9, 2023 3-4 p.m. EST
Letter of Intent Due	April 10, 2023, 5 p.m.
Invitations Made for Full Proposals	April 24, 2023
Community Engagement Studios	May 9, 2023, 12-4 p.m. (30 mins each)
Full Applications Due	June 30, 2023
Awards Decisions (Pending NCI Approval)	August 1, 2023
Award Start Date	September 1, 2023



What is a Community Engagement Studio?

- Guidance session for health researchers
- Feedback from community stakeholder panel
 - Design
 - Recruitment strategies
 - Communication materials
 - Dissemination
- Improve the quality, utility & feasibility of research early in the process
- Collaborative dialog between researchers & community stakeholders



Community Engagement Studios

- Who: applicants invited to submit a full proposal will participate in Community Engagement Studios
- Why: to provide researchers with a real-time, in-person (or virtual) opportunity to share their research concepts and goals with CHC partners and to receive direct feedback and guidance via a facilitated conversation
- When: May 9, 2023, 12-4pm (30 mins each)
- Where: in-person at Mass League's Community Health Institute's Research Day in North Falmouth, MA (virtual option also available)



Pilot Award Structure & Budget

- Up to \$75,000 direct costs for 1 year to support the planning of a new clinical, community, or policy implementation science research project
- A range of study designs are welcome:
 - Observational designs of current implementation of an EBI
 - Testing implementation strategies for delivering EBIs via quasi-experimental or RCT designs
 - Mixed methods studies
- We anticipate that up to 2 to 3 studies will be funded from this RFA
- Pilot grants are designed to fund developmental or early stage work that will lead to other funding (e.g. an R01 award)



Additional Resources that Pilots Receive

- Data analytic and evaluation support
- Methodologic support
- Implementation team support for engaging with CHCs
- Opportunities for mentorship within ISCCCE and across ISC3 network
- Access to CHC (e.g. inner setting) and community level (outer setting) data through the ISCCCE data ecosystem for analyses
- ISCCCE will support CHC participation through other funds
- Facilitated access to ISCCCE community partners, as well as to other NCI-funded Implementation Science Centers



Priority Topics

Improving Uptake of Evidence-Based Cancer Control Services Examples could include:

- Engaging behavioral health (BH) teams to address patient fears around cancer screening and diagnosis (e.g. cross-training BH providers to discuss cancer screening needs, or developing ancillary communication materials)
- Identifying and testing implementation strategies that improve coordination of bundled care to address multiple screening or health needs (e.g. address multiple preventive health or screening needs in a single outreach)



Priority Topics

Methods

Examples could include:

- Evaluating strategies for improving data capture and quality of data related to cancer screening and outcomes
- Developing strategies to increase usability of equity dashboards and performance metrics
- Measuring the value of implementation science for community health centers



Priority Topics

Community & Policy

Examples could include:

- Identifying models for community partnerships that have been successful to address social needs that could be harnessed for cancer prevention
- Developing and testing strategies to inform or enhance evidencebased policy implementation related to cancer prevention and control



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Questions?





Thank you!

For more information on ISCCCE, visit our website: <u>https://www.hsph.harvard.edu/isccce/</u>

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