#### **University of Kentucky**

#### From the SelectedWorks of Anna G. Hoover

April 12, 2014

## Communication Partnerships that Work: ranslating Evidence-based Health Research into Practice

Angela Carman, University of Kentucky Gretchen Holmes, University of Kentucky Anna G. Hoover, University of Kentucky Margaret McGladrey, University of Kentucky Ernie Scott, et al.



## Communication Partnerships that Work: Translating Evidence-based Health Research into Practice

#### Angela Carman, DrPH

National Coordinating Center Faculty and Kentucky Public Health Research Network

Gretchen Holmes, PhD

Rural Health Director, Center for Excellence in Rural Health

Anna Hoover, PhD

National Coordinating Center Deputy Director

Margaret McGladrey, MA

Assistant Dean for Research, UK College of Public Health; Program Manager, Rural Cancer Prevention Center

Ernie Scott, BA

Director of the Kentucky Office of Rural Health

Mary Tucker-McLaughlin, PhD

Assistant Professor, East Carolina University School of Communication

Nancy Winterbauer, PhD

Academic Co-chair, North Carolina Public Health Practice-based Research Network











#### Roadmap

- Introduction to Research Translation (Anna Hoover)
  - Clinical and Public Health
- Center of Excellence in Rural Health
  - Overview and Kentucky Homeplace (Gretchen Holmes)
  - Kentucky Office of Rural Health (Ernie Scott)
- Public Health PBRN/PRC Dissemination & Implementation Project
  - Public Health PBRNs (Anna Hoover)
  - CDC Prevention Research Centers (Margaret McGladrey)
  - Kentucky LHD Adoption (Angie Carman)
  - North Carolina Adaptation (Nancy Winterbauer and Mary Tucker-McLaughlin)
- Closing Comments and Questions











# Dissemination and Implementation Research Terminology\*

#### **Dissemination:**

An active approach of spreading evidence-based interventions to the target audience via determined channels using planned strategies

#### Implementation:

The process of putting to use or integrating evidence-based interventions within a setting.

\*Rabin, Brownson, Haire-Joshu, Kreuter, & Weaver (2008)











# Dissemination and Implementation Research Terminology\*

**Adoption:** The decision of an organization or community to commit to and initiate an evidence-based intervention (EBI)

**Adaptation:** The degree to which a which an EBI is changed or modified by a user during adoption and implementation

**Fit:** The level of match between an EBI and the real or perceived needs, objectives, and structure of an adopting organization.

\*Rabin, Brownson, Haire-Joshu, Kreuter, & Weaver (2008)











## University of Kentucky Center of Excellence in Rural Health













#### **UK Center of Excellence in Rural Health**

- Established in 1990 by the Kentucky
  General Assembly to address health
  disparities in rural Kentucky, including a
  chronic shortage of health professionals
- Key functions:
  - Education
  - Research
  - Service
  - Community engagement











#### **About the Center**

#### **Our Mission:**

Improve the health of rural Kentuckians through education, research, service, and community engagement

#### Our Employees:

Over 150 dedicated individuals living and working in rural areas of Kentucky



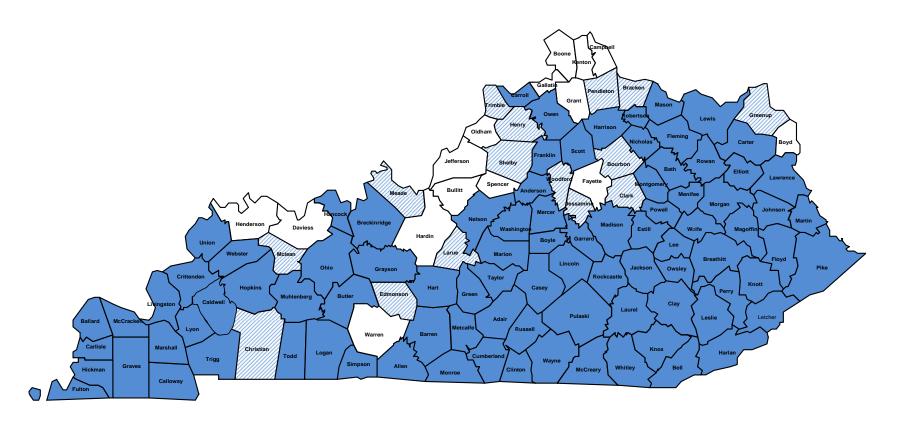








## Kentucky's Rural Composition



- Rural County (90 Kentucky Counties)
- Contains Rural Tract (15 Additional Kentucky Counties)
- Urban County (15 Kentucky Counties)



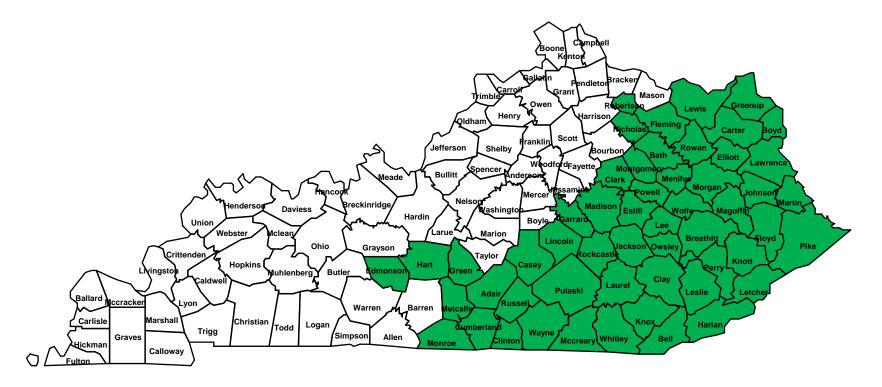








## Kentucky Appalachian Counties



- The population of Kentucky is 4,380,415 with 41.4% (1,814,340) living in rural Kentucky and 58.6% (2,566,075) living in urban Kentucky.
- 54 of its 120 counties are considered Appalachian.











## **Kentucky Health Disparities**

Health Outcome	National Ranking	Kentucky	Kentucky Homeplace	Kentucky Homeplace Medicaid Eligible*
Obesity	40 <sup>th</sup>	30.4%	47.6%	48.4%
Diabetes	41 <sup>st</sup>	10.8%	31.7%	29.7%
High cholesterol	43 <sup>rd</sup>	41.3%	50.2%	46.2%
Sedentary Lifestyle	43 <sup>rd</sup>	29.3%	67.6%	67.6%
Annual dental visits	44 <sup>th</sup>			
Heart attacks	48 <sup>th</sup>	6.1%	15.2%	12.4%
Poor mental health days	48 <sup>th</sup>	4.8	17.2	17.3
Poor physical health days	49 <sup>th</sup>	5.0	18.4	18.1
Cardiac heart disease	49 <sup>th</sup>	5.9%	17.3%	13.7%
Cancer deaths	50 <sup>th</sup>			
Smoking	50 <sup>th</sup>	29.0%	35.1%	40.5%

Kentucky ranks at the bottom in national health outcomes

\*A total of 5,689 clients in the Kentucky Homeplace coverage area are Medicaid eligible























#### State Office of Rural Health

- The SORH Program was established in 1991
- Federal-State partnership
- Administered by Health Resources and Services Administration (HRSA)
- Establishes a focal point within each state for rural health issues
- Provides an institutional framework that links communities with State and Federal resources to help develop long-term solutions to rural health problems











#### **Core SORH Functions**

- Collection and dissemination of information
- Coordination of rural health activities
- Provision of technical assistance
- States have substantial flexibility in using grant funding to address their unique needs.











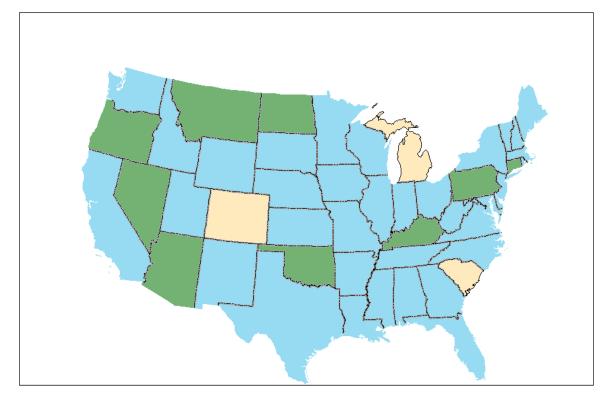
## SORHs by Type

State Office of Rural Health Location by Type



















# Kentucky Office of Rural Health (KORH)

- Direct the coordination of efforts across the state to improve rural health.
- Monitor and evaluate changing federal and state policies that impact state and local rural health programs.
- Act as a liaison between Federal/State agencies on local, state and national rural health issues.











# Kentucky Office of Rural Health (KORH)

- Direct the maintenance and dissemination of rural health information to increase awareness and understanding of issues.
- Tasked with forming rural health networks across the State
- Recommend actions to facilitate rural health program development and implementation.
- Assist with grant application development and review.











### Potential Research Partnering

- Direct the maintenance and dissemination of rural health information to increase awareness and understanding of issues
  - HRSA ORHP policy
    - ACA
      - KYNECT
        - » Public forums to answer questions and sign up Kentuckians
        - » Kentucky Health Benefit Exchange Information Session Road Show
          - Health care providers, administrators, boards of directors, community agencies, coalitions, navigators, mid-level managers, front-line staff, etc.
- Research opportunity
  - Identify best dissemination method for ACA and KYNECT information























### Potential Research Partnering

- Tasked with forming rural health networks across the state
  - Hospitals, health departments, clinic, community groups
    - Tasked with creating projects to improve health care delivery systems, quality of care, community health programs, etc. (individual networks decide)
    - KORH facilitates network development, strategic planning, best practices, funding sources, etc.
  - Research opportunities are limitless

























**Mission:** Provide access to medical, social, and environmental services for the citizens of the Commonwealth

Vision: Educate Kentuckians to identify risk factors and use preventative measures to become a healthier people with knowledge and skills to access the healthcare and social systems

http://ruralhealth.med.uky.edu/cerh-homeplace











## Kentucky Homeplace

#### Who We Serve:

- The program's beneficiaries are the medically underserved or "the needlest of the needy."
- Most clients are at 100% 133% of the federal poverty level.

#### What We Do:

- Homeplace's services are offered at no charge to the clients.
- Community Health Workers (CHWs)
  - Employed from the communities they serve
  - Trained as advocates to provide access to medical, social, and environmental services
  - Deliver education on prevention and disease self-management
  - Collect research data to help identify health trends, socio-cultural and economic barriers in order to find solutions to bridge the gap between uninsured/underinsured individuals and the health care delivery system















#### Research Approach List

- Get to know the population
  - 1. In-person visits
  - 2. Get someone from the community to introduce you
- 2. Don't come to see what you can get from the community..... come to see what you can do for the community
- If you identify a problem..... don't leave without helping them solve it
- 4. Be prepared to share your results
- 5. Don't come rushing in to save us from ourselves
- 6. Partnership is working together as equals and sharing resources and success







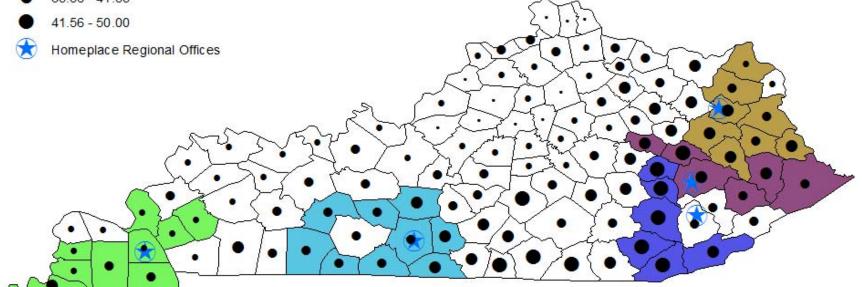




#### Kentucky Medicaid Eligible with Homeplace Regions

#### Pct Medicaid Eligible

- 8.90 20.95
- 20.96 28.65
- 28.66 35.55
- 9 35.56 41.55



Source: Kentucky Cabinet for Health and Family Services Created by: University of Kentucky Center of Excellence in Rural Health

### Kentucky Homeplace Colon Cancer Project Featured on Healthy People 2020 Website

Kentucky Homeplace has been recognized by DHHS' Healthy People 2020 initiative for their work to improve colorectal cancer screening rates.

 Results showed 24% increase in patients asking providers about screening (p=.013)

http://healthypeople.gov/2020/implement/sharinglibrary.aspx?Storyl D=62&source=map











## Improving Diabetic Outcomes (I DO 2 Study)

#### Goal:

Increase diabetes self-management knowledge and improve diabetic outcomes that lead to a reduction in complications resulting in a better quality of life, both for clients and their families



**Anthem Foundation** 













#### Why Focus on Diabetes in Kentucky?

- 54 of 120 (45%) KY counties are Appalachian
- 11.7 % average diabetes rate in these counties
- 10.6% average rate in non-Appalachian KY counties
- 68 KY counties fall within the "diabetes belt"
- 32.7% of Homeplace clients statewide are diabetic
- Mal-distribution of Certified Diabetes Educators (CDEs)

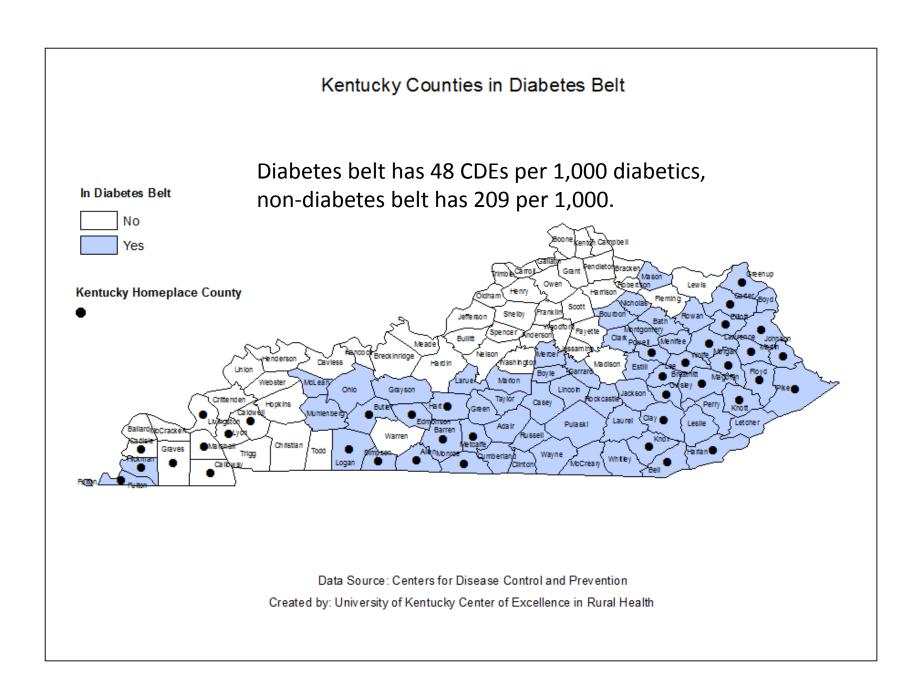












## Improving Diabetic Outcomes







**Anthem Foundation** 











#### Recruitment and Enrollment

- Trained 25 CHWs and 5 Regional Coordinators
- Identified 2812 eligible clients in all Homeplace counties
- 1198 (42.6%) were told by a provider they have diabetes
- 1614 were at risk of developing diabetes based on the ADA Diabetes Risk Test
- 586 (20.8%) signed IRB consent for I DO II study
- 231 (39.4%) participated in nurse-led DSME











### Preliminary Results – Study Sample

- 54.5% were at or below 100% FPL
- 37.2% from 101-175% FPL
- 37.2% had "serious" to "some limitations" with health literacy
- 36.4% had less than high school education
- 27.3% overweight, 59.7% obese (87% combined)
- 48.5% were told they have diabetes
- 51.5% were at risk based on ADA risk test



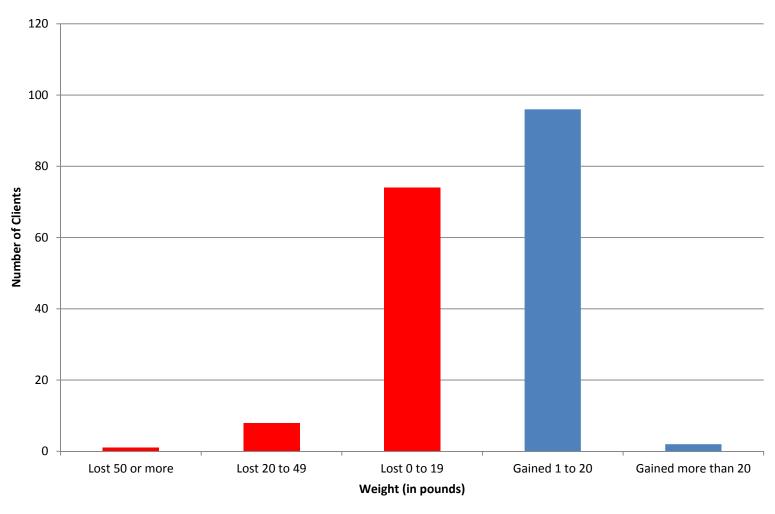








## Weight Change





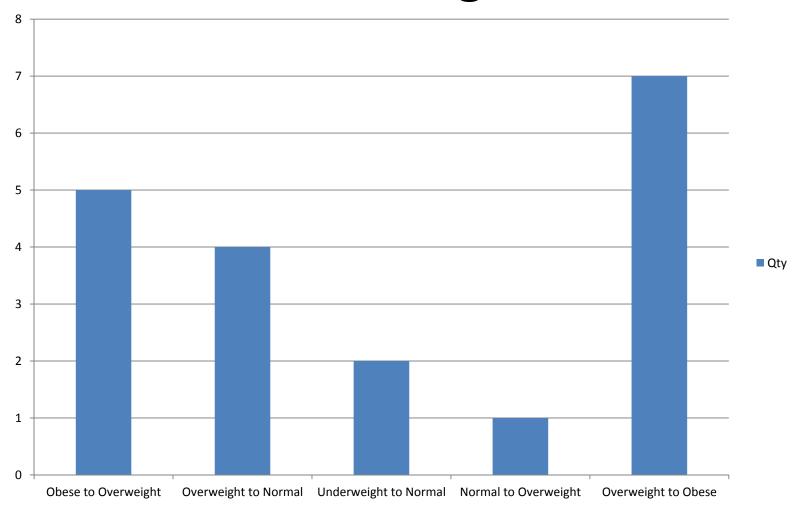








## **BMI** Change





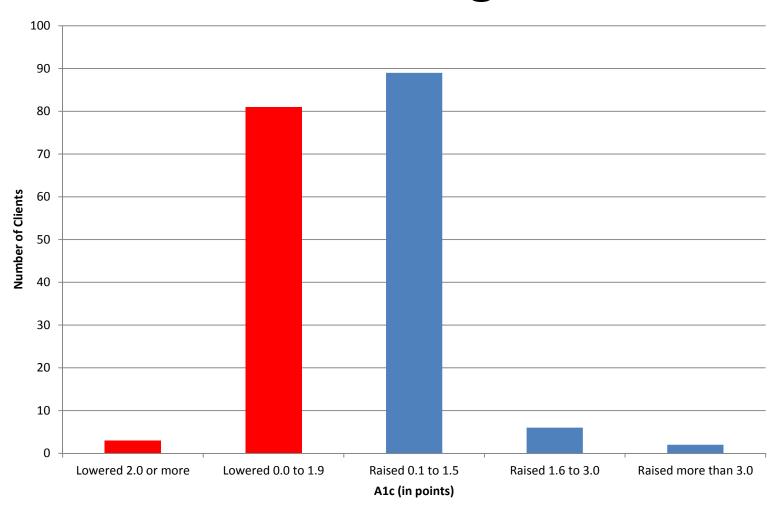








## A1c Change













### Improved DKT Scores of Insulin Users

Question	Pre	Post	Change
If you are sick with the flu, which of the following changes			
should you make?	3.8	45.0	41.2
The Diabetic Diet is:	63.4	95.5	32.1
Which should not be used to treat low blood glucose?	35.7	66.7	31.0
The best way to take care of your feet is to:	68.3	95.7	27.4
If you have taken intermediate acting inculin (NDLL or			
If you have taken intermediate-acting insulin (NPH or			
Lente), you are most likely to have an insulin reaction in:	11.6	23.8	12.2
What effect does unsweetened fruit juice have on blood			
glucose	50.0	55.0	5.0
If you are beginning to have an insulin reaction, you			
should:	59.0	63.6	4.6
Which of the following is highest in carbohydrates	68.2	72.7	4.5
Numbness and tingling might be symptoms of:	0.0	4.5	4.5
Signs of ketoacidosis include:	22.2	25.0	2.8
If you take your morning insulin but skip breakfast your			
glucose level will usually:	69.8	71.4	1.6











### Non-Insulin Users Improved DKT Scores

Question	Pre	Post	Change
The best way to take care of your feet is to:	71.6	92.3	20.7
Which of the following is a "free food"?	33.3	45.8	12.5
Infection is likely to cause:	77.3	87.6	10.3
Which of the following is highest in fat?	18.4	25.5	7.1
The Diabetic Diet is:	61.4	68.3	6.9
Which of the following is usually not associated with diabetes:	82.5	88.5	6
Numbness and tingling might be symptoms of:	4.3	5.9	1.6
Which should not be used to treat low blood glucose?	35.8	37.3	1.5
Which is the best method for testing blood glucose?	70.2	70.9	0.7
For a person in good control, what effect does exercise have on blood glucose?	86.2	86.3	0.1











### More preliminary results

Comparative Emergency Department utilization rates for US vs Homeplace clients

Kentucky Homeplace10.1

US Population Living in Private Residences 39.2

<sup>\*\*</sup>National Hospital Ambulatory Medical Care Survey: 2010





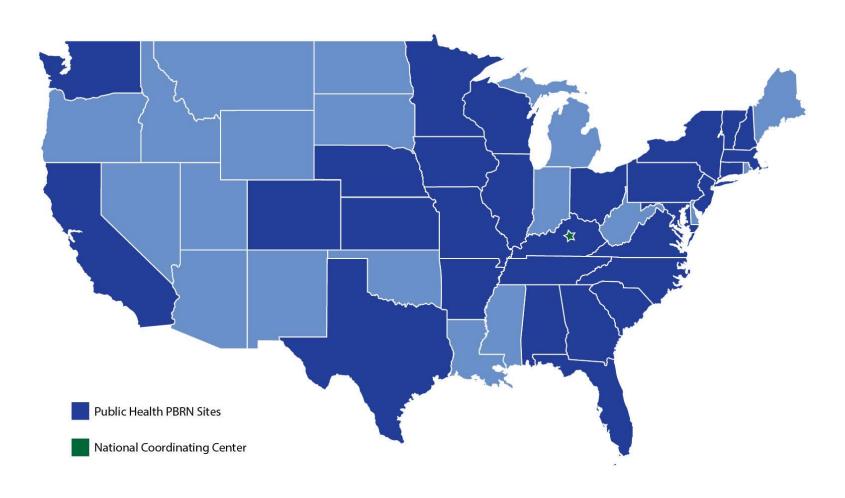






<sup>\*</sup>per 100 persons per year

#### What Are Public Health PBRNs?







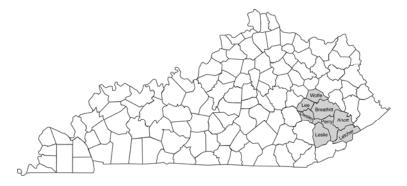






# University of Kentucky PRC: Rural Cancer Prevention Center

The Rural Cancer Prevention Center (RCPC) is a planned collaboration of community members, public health professionals, and researchers designed to reduce health disparities associated with cervical, breast, and colorectal cancer among residents of the Kentucky River Health District in Appalachian Kentucky.



Slide courtesy of RCPC



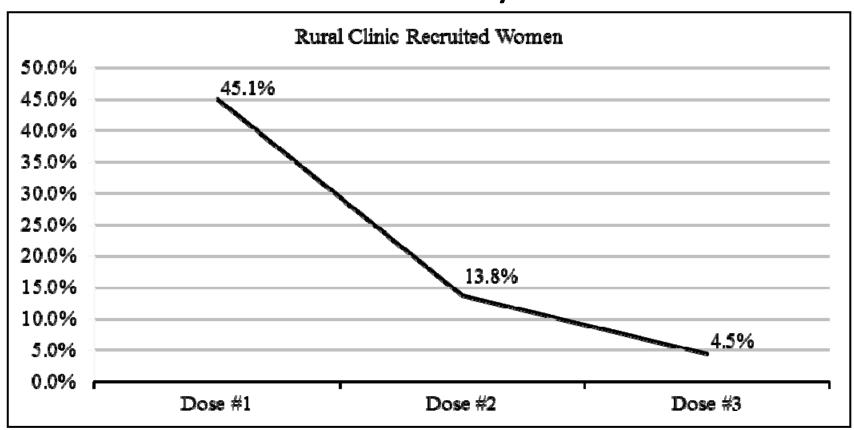








# Formative Research: Uptake and Adherence for Adult Women, Ages 18-26, Appalachian Kentucky

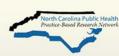


Slide courtesy of RCPC

Crosby, et al., Journal of Rural Health, 2011











### RCPC's 1-2-3 Pap Initiative

- Social Marketing Campaign
- Stage 2: 12-minute
   DVD Intervention
  - Credible Testimonials
- Original Delivery: Nurse to Patient Following First Dose
- Results: increase in uptake of 35.7% (p=.03).\*













<sup>\*(</sup>Vanderpool et al, JoC, 2013)

### D & I Research in LHDs: Research Questions

as the allocation of personnel and other planning resources, identification of project champions, and intra-organizational communication processes, affect the selection of specific channels to disseminate evidence-based public health interventions?











#### D & I Research in LHDs: Research Questions

2) Does the use of specific dissemination channels correspond to intervention outcomes as assessed through secondary data analyses of changes in HPV vaccination series completion rates?











### D & I Research in LHDs: Research Questions

3) What organizational attributes facilitate or impede adoption of evidence-based public health interventions?











# Recruitment: Public Health Practice-Based Research Networks

- RCPC engaged Public Health PBRNs (PH PBRNs) through the Coordinating Center's 2013 Annual Grantee Meeting and follow-up telephone calls
- Kentucky and North Carolina PH PBRNs ultimately elected to participate
- 18 Kentucky LHDs were recruited through the Kentucky Health Department Association Meeting













# Mixed Methods: Quasi-Experimental Design (n=18)

- Dependent Variable: Δ Uptake for HPV Vaccinations
- Quasi-Independent Variable: Delivery Channel



Channel 1
(n=2)
Original clinical setting
(after Dose 1)



Channel 2
(n=13)

Posted to LHD website and/or social media



Channel 3
(n=3)
Screened on a loop in waiting room











#### Methods: Qualitative Process Analysis

- Post-project key informant interviews
  - Project-specific benefits and barriers
  - Unplanned adaptations (and drivers of adaptations)
  - Perspectives regarding potential LHD roles in intervention implementations/adaptations











# One.. Two.. Three.. Pap & the North Carolina Public Health Practice-Based Research Network













To start the process:

Review of Kentucky HPV Intervention video by PH practitioners and public health faculty with the intention of making the video North Carolina-specific











#### **Suggestions:**

- Add b-roll from regions state wide identifying NC
- •Select talent based on NC demographics and appropriate expertise. (African American main host, Hispanic co-host)
- •Allow talent to speak conversationally based on an outline versus memorization of a script (news interview format)
- Shorten overall











#### Why we chose the talent that we did...

#### Data:

- 22% of North Carolinians are African American, the 8<sup>th</sup> highest African American population in the US (US Census, 2013)
  - Over 8% of North Carolinians are culturally Hispanic representing an increase in population of over 900% in the past 20 years (US Census, 2013; North Carolina Dept. of Cultural Resources 2013)!











#### Step by step

- Selection of talent and experts
- Scheduling of b-roll, expert and studio shoots within allotted 3 months
- Identification of graphic artist











#### Step by step

- Video shot on tapeless Panasonic video camera and in ECU studio
- Edited with non linear Edius video editing software
- Revised based on Kentucky partner feedback
- Distribution by Youtube link and hard copy DVDs to 26 participating
   North Carolina Health Departments











Theoretical Framework

We developed the story board based on the Elaboration Likelihood model using both the central and peripheral routes of persuasion with an emphasis on clarity and brevity.

123 Pap NC











# Dissemination and Implementation Research

#### Ethical

Maximizing positive health/population health impacts of research findings

#### Pragmatic

- Evaluation: effectiveness, efficiency
- Funding Opportunities
  - NIH D&I portfolio, research translation and engagement cores among P30 and P42 centers, TIDIRH program
  - CDC PRC interest in 2014-2019 cycle
  - NSF decision science portfolio
  - RWJF new interest in systematic study of adaptations
  - VA Quality Enhancement Research Initiative











### **Funding Opportunities**

- NIH: Dissemination and Implementation Research in Health
  - R01: <a href="http://grants.nih.gov/grants/guide/PA-files/PAR-13-055.html">http://grants.nih.gov/grants/guide/PA-files/PAR-13-055.html</a>
  - R03: <a href="http://grants.nih.gov/grants/guide/pa-files/PAR-13-056.html">http://grants.nih.gov/grants/guide/pa-files/PAR-13-056.html</a>
  - R21: <a href="http://grants.nih.gov/grants/guide/pa-files/PAR-13-054.html">http://grants.nih.gov/grants/guide/pa-files/PAR-13-054.html</a>
  - TIDIRH:
     <a href="http://obssr.od.nih.gov/scientific\_areas/translation/dissemination\_and\_implementation/index.aspx">http://obssr.od.nih.gov/scientific\_areas/translation/dissemination\_and\_implementation/index.aspx</a>
- CDC: Prevention Research Centers
  - http://www.cdc.gov/prc/center-descriptions/index.htm
  - 2014-2019 funded centers not yet listed
- NSF: Decision, Risk, and Management Sciences
  - <a href="http://www.nsf.gov/funding/pgm\_summ.jsp?pims\_id=5423">http://www.nsf.gov/funding/pgm\_summ.jsp?pims\_id=5423</a>
- U.S. Department of Veterans Affairs
  - Quality Enhancement Research Initiative:
     <a href="http://www.queri.research.va.gov/partnered">http://www.queri.research.va.gov/partnered</a> research.cfm
  - Implementation studies in VA clinical practice settings
- Robert Wood Johnson Foundation
  - Funding alert sign-up here: <a href="http://www.rwjf.org/en/grants/calls-for-proposals.html">http://www.rwjf.org/en/grants/calls-for-proposals.html</a>











#### For more information contact:

Angela Carman, DrPH: angela.carman@uky.edu

National Coordinating Center Faculty and Kentucky Public Health Research Network

Gretchen Holmes, PhD: gretchen.holmes@uky.edu

Rural Health Director, Center for Excellence in Rural Health

Anna Hoover, PhD: aghoov2@uky.edu

National Coordinating Center Deputy Director

Margaret McGladrey, MA: margaret.mcgladrey@uky.edu

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Director of the Kentucky Office of Rural Health

Mary Tucker-McLaughlin, PhD: TUCKERMCLAUGHLINM@ECU.EDU

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