

FUNDING OPPORTUNITY



CDC 6|18 Initiative Case Study

Enhancing Prevention and Population Health Education by Accelerating Evidence into Action

AWARD INFORMATION

Type of Award:	Contract/Subaward
CFDA Number:	93.283
Opportunity Title:	CDC 6 18 Initiative Case Study: Enhancing Prevention and Population Health Education by Accelerating Evidence into Action
Participating Organizations:	Centers for Disease Control and Prevention Association for Prevention Teaching and Research
Estimated Total Program Funding:	\$14,000 maximum award (including indirects)
Allowable Indirect Rate:	8% maximum
Number of Awards:	1
Application Due Date:	January 31, 2017
Notification of Award Date:	February 28, 2017
Project Completion Date:	August 10, 2017

PURPOSE

The Association for Prevention Teaching and Research (APTR) and the Centers for Disease Control and Prevention (CDC) announce the availability of funds to develop problem-based case studies aimed at deepening health professions students' understanding of the value of public health–health care collaboration.

Through the 6|18 Initiative, CDC is partnering with health care purchasers, payers, and providers to improve health and control health care costs. CDC provides these partners with rigorous evidence about six high-burden health conditions and associated interventions to inform their decisions to have the greatest health and cost impact. This initiative offers proven interventions that prevent chronic and infectious diseases by increasing their coverage, access, utilization and quality.

In particular, CDC is targeting six common and costly health conditions – tobacco use, high blood pressure, healthcare-associated infections, asthma, unintended pregnancies, and diabetes – with 18 proven specific interventions that form the starting point of discussions with purchasers, payers, and providers. It aligns these evidence-based preventive practices with emerging value-based payment and delivery models. For more information and resources, please go to www.cdc.gov/sixeighteen.

ELIGIBILITY

Public health and clinical health professions institutions of higher education in the United States, specifically departments offering education in population health and related disciplines, who are institutional members of the Association for Prevention Teaching and Research at the time of award.

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Additional Information on Eligibility

The primary applicant faculty must be:

- experienced in instructional design and/or case study development for graduate-level health professions students.
- part of an interprofessional team of faculty (applications including more than one health profession are preferred and strongly encouraged, but only one faculty member can act as the Principal Investigator/point of contact)
- from an institutional member of APTR at the time of the award and throughout the project grant period. Preference will be given to current APTR Institutional members, but membership is not required to apply.

FUNDING OPPORTUNITY DESCRIPTION

APTR is providing a small grant to faculty to support the development of an educational case study that focuses on the importance of building effective, outcome-oriented partnerships and coalitions among public health, providers, purchasers, payers, and communities. This should include addressing how to leverage facilitators and overcome barriers to effective partnerships, such as learning the assets, culture, and language of other stakeholders, how to articulate a convincing business case, and how to manage operational barriers and defining measures of effectiveness of the partnership.¹

This case study should deepen students' understanding of three population health concepts in particular:

1. Identify how socioeconomic, environmental, cultural, and other population-level determinants of health are fueling the growth of high-burden health conditions.
2. How to use population health improvement strategies (e.g., systems and policy advocacy, program or policy development) to operationalize interventions on a health systems level.
3. How to use community-engagement strategies to improve the health of communities, contribute to the reduction of health disparities, and promote the sustainability of a system-level intervention.

Each case study will include a facilitator guide for instructors, discussion questions, and a quiz or other form of student assessment. The case study should be applicable to a variety of students across the health professions, and will be promoted by the 11 health professions education associations that comprise the APTR Healthy People Curriculum Task Force.

PROJECT REQUIREMENTS

The case study should:

- Engage students in a 60 minute-long problem-solving case study exercise. Optional: Develop more than one case study exercise with shorter components.
- Be organized around at least one of the six high-burden health conditions, addressed by the 6|18 Initiative: tobacco use, high blood pressure, healthcare-associated infections, asthma, unintended pregnancies, and diabetes. Integration of appropriate combinations of high-burden health conditions is preferred.
- Include background on reasons for selection of the specific health condition(s), such as the burden in the identified community or the impact on health equity.

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- Utilize one or more of the 18 specific evidence-based interventions that can prevent or control conditions effectively.
- Identify facilitators and barriers to implementation.
- Include patient/client/population perspective(s) as relevant.
- Include a focus on building partnerships and coalitions among public health, health care and payers, complementary roles of stakeholders in achieving 6|18 objectives, and how to address challenges in coalition building.²
- Be developed through a collaboration between faculty at an academic institution and representatives from a health care partner, including but not limited to: a health department, primary care provider, State Medicaid agency, or health insurance company.
- Contain learner assessment/quiz questions with a descriptive answer key.
- Include a facilitator guide with quiz questions and answer key, other assessment tools (optional), discussion questions, and recommended resources.
 - Incorporate appropriate federal resources related to Health System Transformation into the recommended resources section of the case study Facilitator Guide.^{3,4,5}
- **SELECT ONE OF THE FOLLOWING OPTIONS:**
 - Be organized around the data and experiences of the public health–health care payer partnership in one state, territory, tribal nation, or county. Learners would work through what policy and practice changes need to happen for 6|18 to be implemented in that state or community.
 - Case presentation of a patient or population subgroup affected by one or more of the six high-burden health conditions; cost-benefit analysis; appropriate partners from public health, provider, and payer sectors, and recommendations.

The finished case study should include:

- A detailed narrative addressing the requirements listed above
- Graphics such as photos, graphs, charts, or videos (with copyright rights), as applicable. If a video is produced, it should be housed on a publicly-accessible server or on Vimeo.com.
- A detailed learner assessment instrument with scoring rubric. Each question will have an answer with descriptive explanation.
- A facilitator guide with explanation of relevant issues, information about the roles and responsibilities of different partners, topics for further discussion, and recommended resources and readings.

APPLICATION FORMAT

Online submission form and narrative applications must be submitted by 11:59 PM PST on **January 31, 2017**.

Application Narrative:

- Format: Adobe Acrobat PDF
- Maximum number of pages: 8 pages; excluding budget and appendices
- Font size and spacing: 12-point font; 1.5 spaced
- Number all narrative pages and include PI last name on each page
- All documents in the application package must be saved with the PI last name first (i.e. Smith_Narrative.pdf)

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The narrative (detailed concept and project plan for developing the case study) must include the following items in order:

- I. Background and Project Need:
 - a. Describe how this case study will enhance existing education around the high-burden condition(s) selected and the importance of cross-sector partnerships across public health and the health care system to improve population health
 - b. Describe the type of case study and 6 | 18 conditions and interventions to be addressed
- II. Project Plan and Approach:
 - a. Describe anticipated outcomes for the student learners (competencies and learning objectives)
 - b. Timeline addressing how applicant will complete case study within the project period
 - c. Describe quality assurance and evaluation plans
- III. Proposed health care partner(s) (e.g. health department, primary care provider, State Medicaid agency, health insurance company, etc.) and their proposed roles
- IV. Summary of key personnel's experience and capabilities related to case study development and public health/health care collaboration

Other Application Content (will not count toward total page count)

1. Budget summary table and budget justification not to exceed the maximum award amount. OMB Cost Principals of Federal grants as set forth in the Title 2 Code of Federal Regulations (CFR) Part 215 (codified by HHS at 45 CFR Part 74) apply. APTR Membership dues are not an allowable cost.
2. Up to 4 key personnel Curricula Vitae (CVs)
3. Evidence of completed A-133/Single Audit for 2015 (electronic link to audit report or audit letter acceptable)
4. Up to 4 other Appendices (optional)

APPLICATION SUBMISSION

Applications must be submitted electronically at www.aptrweb.org/618casestudy. Applicants can complete the "application narrative" and "other application content" offline and then upload and submit. Applications submitted are electronically time/date stamped. Applications will be objectively peer reviewed by CDC personnel and APTR members.

QUESTIONS

For administrative and technical questions, please contact:

Vera S. Cardinale, MPH
Director, Training and Education
Association for Prevention Teaching and Research
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ASSOCIATION FOR PREVENTION TEACHING AND RESEARCH (APTR)

www.aptrweb.org

Founded in 1942, the Association for Prevention Teaching and Research (APTR) is the national membership association for medical and health professions institutions and their faculty advancing prevention and population health education and research. APTR advances population health education, research and service by linking and supporting members from across the academic prevention community. APTR members include academic preventive medicine departments, graduate programs in public health, medical and health professions programs with a population health focus, and faculty teaching population and public health. In cooperation with federal and private partners, APTR develops curriculum materials, professional development programs, and didactic tools for educators, researchers, residents, and students to redefine how we educate the health professions workforce.

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

<http://www.cdc.gov/ophss/csels/dsepd/academic-partnerships/index.html>

This funding opportunity is made available by the Academic Partnerships to Improve Health (APIH) in the Centers for Surveillance, Epidemiology and Scientific Services. APIH focuses on improving the health of individuals and communities through alliances among academic associations and CDC. APIH drives improvement of health outcomes by working within the educational systems for public health and clinical health professions students to enhance teaching of population health concepts; aligning academic approaches (curricula, teaching materials, or methods) and field experiences with ground-level public health priorities and practice needs; fostering inter-professional collaboration and learning in health professional education; strengthening academia's linkages to public health practice and providing opportunities for hands-on experience for students working with communities and public health partners.

The case studies and related materials must include the following disclaimer: "These activities are made possible through a cooperative agreement between the Association for Prevention Teaching and Research (APTR), and the Centers for Surveillance, Epidemiology and Scientific Services, Division of Scientific Education and Professional Development (DSEPD), Centers for Disease Control and Prevention (#5U36OE000005). The findings and conclusions in this publication are those of the author(s) and do not necessarily represent the views of the CDC or the Association for Prevention Teaching and Research."

¹ Hester, J. A., J. Auerbach, L. Seeff, J. Wheaton, K. Brusuelas, and C. Singleton. 2016. *CDC's 6|18 Initiative: Accelerating evidence into action*. National Academy of Medicine, Washington, DC. <http://nam.edu/wp-content/uploads/2016/02/CDCs-618-Initiative-Accelerating-Evidence-into-Action.pdf>.

² Id.

³ <http://www.cdc.gov/policy/hst/>

⁴ <https://www.cdc.gov/stltpublichealth/program/transformation/index.html>

⁵ <https://vimeo.com/user34045061/videos>