



PBRNews

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A Quarterly Newsletter from the AHRQ PBRN Resource Center

Update from the (Acting) AHRQ PBRN Director

By David Meyers, Director, AHRQ Center for Primary Care

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Years ago, August was a quiet time here in Washington. Locals, including Congress, escaped the heat and humidity, and the pace of work slowed. Maybe it is due to better air conditioning or maybe the general increased pace of work driven by the web and smart phones, but we've been busy here at AHRQ this summer. Of course it may just be me who's feeling this without David Lanier or Mike Parchman leading AHRQ's PBRN initiative.

Some in the PBRN community have worried that AHRQ is lowering its commitment to primary care and PBRNs. They note that in addition to not having replaced Mike, AHRQ did not host the national PBRN conference this year, that AHRQ allowed the PBRN master contract program to sunset, and even the National PBRN Resource Center may be ending. While I understand and appreciate the concern, let me state unequivocally that AHRQ is committed to the PBRN program and calm the rumors with a few announcements:

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- ◆ Instead of recruiting a single director of the PBRN initiative, AHRQ is hiring both a PBRN initiative leader and a primary care policy and implementation scientist. Stay tuned for their arrivals this fall.
- ◆ AHRQ was pleased to be able to provide grant support for a national PBRN conference this spring attended by over

200 folks from around the country and around the world (and no one spent \$16 on a muffin or a dime on mind readers).

- ◆ This month AHRQ will announce grant funding for eight new Research Centers in Primary Care Practice Based Research and Learning. See the article in this issue for more details.
- ◆ AHRQ has committed to continued support for the National PBRN Resource

Center, the PBRN registry, and learning communities. Bids are in and we hope to make an award soon.

As we approach these transitions and new beginnings, I'd like to take a moment to

recognize the significant contributions of our colleagues at the University of Minnesota and Westat in supporting and building the PBRN Resource Center for the past five years. They have led dozens of learning sessions, built electronic tools to improve PBRN efficiency, designed tool kits to help staff members launch new PBRNs, and maintained our shared website and PBRN registry. If you've benefited from their support, which I know you have if you're reading this newsletter, please take a moment to join me in thanking them. Thanks Kevin, Steve, Carol, Paula, Lauren, Ellen, Sherri, Nick, and all the rest!

There is much good work to be done and we are proud to be doing it with all of you.

Onwards – David



Contact Us

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Increasing the Research Capacity of PBRNs: A Parting Word from the Resource Center

By Kevin A. Peterson and Steve Durako, on behalf of the University of Minnesota and Westat

As David Meyers' gracious letter reminds us, much has changed in the PBRN community in recent years. Indeed, in the five years since our team (comprised of staff at the University of Minnesota and Westat) assumed leadership of the PBRN Resource Center, the number of registered networks has grown from 106 (2008) to 136 currently registered in 2012. We have been proud to provide resources and support to all the new and mature networks as they plan, implement, and disseminate high quality primary care research. More information on the current status of PBRNs can be found in the upcoming September-October issue of *The Journal of the American Board of Family Medicine*, where we summarize the status of PBRNs (registered in 2011) and discuss the important role that PBRNs continue to play in improving the quality of health care. We want to thank the directors, coordinators, and others for providing these useful data so that the Resource Center and AHRQ can better understand both your challenges and achievements.

We hope that as the AHRQ PBRN Resource Center we have also provided you with useful information, tools, and a spirit of engagement with other primary care investigators. In addition to collecting the annual registry data, we provide information about PBRNs and their research activities on the public AHRQ PBRN website, which averages over 6500 hits per month; the most popular web pages include the PBRN Bibliography and the

Registry. The PBRN Portal, launched in 2010, has resources and tools and currently supports approximately 120 PBRN researchers each month. The Resource Center also planned and executed 4 Annual PBRN Research Conferences hosting over 1100 attendees, and offered Peer Learning Groups and webinars that trained hundreds of researchers and PBRN members in subjects fundamental to practice-based research. Finally, we have offered technical assistance and expertise on a wide variety of topics ranging from tools for new PBRNs, insights into establishing sustainable infrastructures, and Office of Management and Budget reviews. Through all of these activities, we have enjoyed working with the PBRN community and thank each of you for sharing your experiences with us.

We would also like to thank the 27 individuals who have served on our Steering Committee during this period. Their direction has been both valuable and important to AHRQ. As we move forward and anticipate new opportunities for PBRNs, we look to AHRQ to continue to recognize the importance of practice-based clinical research, and to continue to support the essential role of the community primary care provider in research to understand, innovate, and improve community health across the country. We believe that the future of PBRN research has never looked brighter.

AHRQ Research Centers in Primary Care Practice Based Research and Learning

In September 2012, AHRQ plans to announce grant awards to eight institutions to support collaborative centers for primary care practice-based research.

The goals of this new initiative are to accelerate the generation of new knowledge about the delivery and organization of primary care and to create communities of learning for primary care practices in which they may improve quality, patient safety and effectiveness of care.

For over a decade, AHRQ has invested in primary care PBRNs as vehicles for 'putting practice into research' while simultaneously 'putting research into practice.'

While previous AHRQ efforts have supported PBRNs with as few as 15 primary care practices, each Center created through this program has a minimum of 120 member practices and several have more than 500. Many of the Centers are collaborations between smaller well-established PBRNs. By leveraging common resources, these Centers are expected to demonstrate greater

productivity and to develop the ability to plan and conduct independent research projects more quickly and with greater power than they would as separate PBRNs.

AHRQ grant funding will allow each Center to support administrative and research cores over the next five years. Additionally, AHRQ intends to release limited competition rapid-cycle research grants targeted to these Centers. These limited competition funding opportunities will focus AHRQ priority areas including how primary care practices can contribute to patient safety, implement health IT to improve quality, and deliver patient-centered care. The Centers will be encouraged to leverage Center infrastructure to pursue a wide-variety of research projects, funding opportunities, and quality improvement activities supported by a broad base of funders.

For more information, please visit <http://pbrn.ahrq.gov/> in September.

2012 AHRQ-Registered PBRNs and the Annual “PBRN slides”

The Resource Center has completed data collection for the 2012 registry. Every year network directors and/or coordinators are asked to provide or update information about their network’s leadership, membership, participation in studies, and research interests. Of the 136 registered networks, 116 are primary care PBRNs (the other 20 are either international networks or non-primary care PBRNs). New items on this year’s registry addressed the number of full-time network staff; percentage of members using electronic medical records; use of dissemination, implementation, and diffusion strategies; and capacity building activities. AHRQ and the Resource Center use this information to plan resource development and learning opportunities for PBRNs.

The Resource Center also provides aggregate data from the annual PBRN registry called the “PBRN slides.” This downloadable and modifiable set of slides highlights the key characteristics of the primary care PBRNs registered each year with AHRQ. You may find this information useful for presentations, reports, or proposals. Select the following link to view/download the [2012 PBRN Slides](#).

If your network has not registered for 2012, or you would like to edit your network’s contact information on the PBRN public website, please contact Nicholas Buck at nicholasbuck@westat.com.

Portal Updates, Tips, and Tools

Access to the PBRN Research Portal is one benefit of registering your PBRN with AHRQ. The Research Portal (<https://portal.pbrn.ahrq.gov>) is a secure website that complements the PBRN public website by providing research resources and enhancing communication and collaboration for PBRNs.

In July and August, we sent an email to all registered PBRNs, asking networks to review and verify their portal users. Thank you for your quick and thorough responses. We received a response from about 75% of networks. Half of responding networks requested changes in their accounts for reasons such as staffing and email changes. No networks reported needing accessibility accommodations for visual or other impairments.

Because of your feedback during the user verification process, we’d like to highlight a few features and tools of the portal. →

If you have any questions about the PBRN Research Portal, please contact the Resource Center at pbrnrc@umn.edu.



Network pages: Each registered network has its own set of web pages on the portal. These pages can only be accessed by members of that network who also have portal access. Network pages include collaborative areas for sharing documents and discussions.

Study web pages: A set of pages similar to network pages can be created for single- or multi-site studies. Study web pages also have collaborative areas for document sharing and discussions.

Portal user guides: User guides are posted on the portal on the “About the PBRN Research Portal” page. The guides provide directions for creating and managing user accounts, adding content to your network and study pages, and using documents and discussion areas.

PBRN Research Bibliography

The Resource Center would like to thank the networks that contributed articles for the annual update of the PBRN Research Bibliography. We hope the database continues to serve as a valuable resource for developing PBRN research, authoring papers, and writing grant proposals.

If you would like to submit a publication for inclusion in the PBRN Research Bibliography, please first review the PBRN Literature Guidelines on the public website, and then email the proposed citation’s PubMed ID or full-text web link to nicholasbuck@westat.com.