

Action Plan

**Georgia Health Policy Center
Andrew Young School of Policy Studies
December 1, 2007**

The Health Policy Center submitted its Academic Program Review Research Center Self-Study Report December 1, 2006. Subsequent to the submission of the Self-Study, an External Program Review site visit was conducted January 29-30, 2007, with a report submitted February 2007. The Senate Research Committee & Research Center Review Subcommittee conducted its review March 20, 2007. This Action Plan is based on the findings and recommendations of the Self-Study Report, the External Program Review, the Senate Research Committee, and the goals and objectives of the Andrew Young School of Policy Studies.

As the only public university-based health policy center in Georgia, the Center has become a premier source of policy analysis, applied research, evaluation, and technical assistance for local communities, governmental agencies, the legislature, provider associations, and philanthropic organizations. The Center has a national reputation as a center of excellence for its work in rural communities and health system technical assistance. Based on the findings and recommendations of the external and internal review committees, this action plan focuses on strategies that will ensure both continued development of the Center's applied health policy capacity and strategic expansion of its research and scholarship productivity.

Findings from the Internal (Self-Study and Senate Research Committee and Research Center Review Subcommittee) and External Reviews

Overall, the Senate Research Committee found that the Health Policy Center is fulfilling its stated goals and mission and maintaining a national reputation. It was commended for contributing to the overall well-being and health of Georgians and encouraged to continue its efforts to be recognized nationally as a leader in innovative approaches to community-based health improvement. The Center was also encouraged to develop methods to engage doctoral students in research. The Committee recommended that the Center continue as a Georgia State University research center. The external reviewers described the Center's work as well-known, highly regarded, and highly valued by community and state leaders throughout Georgia and by a growing number of national health policy leaders in government, foundations, and elsewhere.

Internal and external observations with respect to the Center's specific goals

Goal 1. Continue strong policy analysis and implementation work to make the Center the "Center of Choice" for health policy advice in Georgia. The internal review stated that the Center: earned a reputation for high quality work; established and maintains relationships with key leaders in the legislature and executive agencies, philanthropy, business, advocacy, provider and community groups at local, state, and national levels; and developed and maintains contacts with print and electronic media. The external reviewers stated that these relationships and the goodwill they have engendered for the University and the Andrew Young School are important building

blocks critical to the Center's future development. Describing the Center as the "go-to" source in the state for objective, non-partisan, and credible health policy analysis and assistance, the external reviewers believe the Center represents a highly visible embodiment of the service mission of George State University and the Andrew Young School of Policy Studies.

Goal 2. Develop the Center as a nationally prominent Center. Internal reviewers determined that the Center has attained national prominence through its innovative Networks for Rural Health program, receiving a MOBIS designation provided by the General Services Administration that identifies an organization as a preferred vendor of the federal government. The Center is one of three health policy centers nationwide to have such a designation. The Center maintains contracts with other federal agencies, associations, and national philanthropic organizations and provides leadership to national stakeholder groups by serving on boards and committees. The external reviewers found the Center to be nationally well known, highly regarded, and highly valued for its applied research and rural community and health system technical assistance.

Goal 3. Be a Leader in the Andrew Young School of Policy Studies in raising of external funds. The Center reported \$19,313,645 in active, sponsored grants in 2005 which accounted for 44% of all AYSPS external funding and the most for any one academic department or center within AYSPS. (This figure is taken from the 2005 AYSPS Annual Report which defines Active Sponsored Grants as any grant that had activity at any point during CY 2005.) Over the last five years, the Health Policy Center has had an average of \$4,000,000 in new contracts each year.

Goal 4. Manage the Center efficiently and prudently. The internal reviewers noted that the Center intentionally diversified its funding from one major contract with the Department of Community Health to more than 40 contracts with national, state, and local public and private funders. Such deliberate diversification of funders requires excellence in proposal development, project implementation, and communication dissemination. The external reviewers found the Center to be very well managed with strong and effective leadership and a seemingly cohesive, team-oriented, and productive staff.

Goal 5. Ensure the Center is a more integral part of the academic and research mission of the Andrew Young School of Policy Studies. The internal reviewers noted that over the last five years, the Center has submitted an increasing number of abstracts to the premier health research conferences, published in peer-reviewed and other journals, launched a Center working paper series, and sponsored two research-focused Child Policy Speaker Series and two Child Policy Research Symposia. The Center has also developed a health data warehouse and the internal technical capacity to analyze large data sets, with particular expertise in Medicaid claims data. Center staff taught a course on Using Research in Health Policy in 2001 and 2004 for doctoral and masters Public Administration and Public Health students and initiated a three-year program to prepare doctoral students in the Andrew Young School to develop their interest in health programs and policy with the Center. In addition, the Center has collaborated with more

than 25 percent of Andrew Young School faculty, with faculty from other GSU Colleges, and with faculty from other universities on research, evaluation, program design, fiscal projects, seminars, and symposia. The external reviewers were impressed with the volume and quality of the Center's published work and with the high regard for the work among external funder and user audiences. External reviewers stated that even though the Center has a limited track record in scholarly, peer-reviewed publications, it has produced many high quality Working Papers, Issue Briefs, and other applied publications targeted to its primary audience of state and local policymakers. They noted that the Center provides course buy-out funding for faculty and student support, and the Center director and senior staff expressed a strong interest in contributing to, and participating more fully in, the academic life of the School and the University.

Specific barriers to success identified by the Internal (Self-Study and Senate Research Committee and Research Center Review Subcommittee) and External Reviewers

The internal review indicated that it is difficult to carry out capstone research projects, market new activities, and develop new proposals with only 10% of the Center's budget derived from University and State funding. The time frame for most of the contracts is 12 months or less so that the deliverables require a fairly quick turnaround. In keeping with the strategic direction of the Andrew Young School of Policy Studies, the Center is striving to maintain a balance between client needs and scholarly research. Due to the time constraints and the majority of staff resources focused on grant deliverables, the Center does not have sufficient time or resources to increase its academic output by translating the work into scholarly publications and reports. The Center's greatest impediment to conducting research is its need for resources to expand academic contributions to the School and the University. The Center needs financial resources to increase its academic productivity and advance knowledge through the translation of its research findings into the academic literature. The external reviewers observed that the Center lacks sufficient doctoral prepared faculty or staff to fulfill the expectations of the School and the University for traditional research and academic focus and productivity. The fact that the current director is not a tenure-track faculty member in the School presents barriers for greater integration of the Center into the School and the University. Existing faculty in the two academic departments in the School have limited interest in health policy research at this time.

Accomplishments Subsequent to the Self-Study, External Program Review, and Senate Research Committee and Research Center Review Subcommittee Review

As mentioned in the Center's Self-Study Report, in 2006, the Center began an internal strategic planning process that included the preparation of the Self-Study Report and culminated in the adoption of three goals (see next section) and several objectives. However, to be consistent with the presentation of findings of the internal and external reviewers, the Center's accomplishments are listed according to the original five goals.

- Be the “Center of Choice” for health policy in Georgia by:
 - Responding to a request from the Metro Atlanta Chamber of Commerce and Special Grady Study Committee of the Georgia House of Representatives to conduct analyses of the Grady Memorial Hospital market and the metro Atlanta safety net to inform the decision making process around the future of Grady Memorial Hospital.
 - Working with the Georgia House and Senate leadership to design a half-day educational session on Certificate of Need law in Georgia to inform their decision-making for the 2007 legislative session.
 - Providing data and analytic support to the Governor and Lt. Governor and key departmental leadership to design policy options for covering a portion of Georgia’s 1.7 million uninsured residents.
 - Preparing a brief synthesizing all Center research to date related to PeachCare, which provided a state/local context for the national S-CHIP debate.
 - Conducting a community needs assessment, strategic planning, and program evaluation for three regional health networks.
 - Coordinating the Georgia Youth Fitness Assessment (GYFA) for the Philanthropic Collaborative for a Healthy Georgia. The GYFA was a statewide assessment of the fitness and activity levels of 5,200 5th and 7th grade students in 93 randomly selected schools.
 - Facilitating the development of the Georgia State Rural Health Plan and the Georgia State Cancer Plan.
- Become a nationally prominent Center by:
 - Interviewing national leaders and policymakers to advise the Centers for Disease Control and Prevention about incorporating health prevention and promotion into the national health reform debate.
 - Serving on several national boards, including the Director selected to be President-elect of the National Network of Public Health Institutes and Vice Chair for Communities Joined in Action. Membership on other national boards includes the Physicians Innovations Network and the State Health Policy Centers Collaborative.
 - Contracting for a significantly expanded scope of work with the Administration for Children and Family Services (Building Strong Families) and the Health Resources and Services Administration (which includes providing technical assistance to 8 states in the Delta region and increasing from 129 to 141 the number of outreach and development grantees).
- Raise external funds by:
 - Contracting for 19 new projects with national, state, and local, public and private entities (\$3,109,062).

- Manage efficiently and prudently by:
 - Creating and piloting a level of effort reporting system for research associates.
 - Producing job descriptions for all current positions and evaluating organizational structure and reporting relationships.
 - Cleaning up and organizing the internal and external files on the shared I-drive.
- Ensure it is an integral part of the academic and research mission of AYSPS by:
 - Publishing articles in Health Services Research, Journal of Policy Analysis and Management, Journal of Public Health Management Practice, and the Commonwealth Fund Report.
 - Presenting at the Academy Health Annual Research Meeting (the GHPC had a record 13 presentations accepted for individual, panel, and poster presentations in 2007), American Public Health Association, American Evaluation Association, and the National Network of Public Health Institutes.
 - Teaching a PAUS-approved course on Using Research in Health Policy for doctoral and masters Public Administration and Public Health students.
 - Collaborating with other AYSPS faculty on projects related to S-CHIP, public health finance, childhood obesity, long term care, and child policy.
 - Leading a multi-college faculty committee created to address the current health policy emphasis in the GSU/Georgia Tech Policy PhD Program, which resulted in recommended modifications and enhancements to the program.
 - Supporting two doctoral students in the Center's re-designed program to increase its focus on academic research and publications in health care and policy.

Proposed Action Plan

As identified in the Self-Study Report, the Center has established the following three goals going forward:

- Actively inform health decision-making and promote health policy alignment throughout the state of Georgia
- Become a leader in health policy research.
- Be nationally recognized as a leader in innovative approaches to community-based health improvement.

Goal: Actively inform decision-making and promote health policy alignment throughout the state of Georgia.

Action 1: Establish Advisory Committee.

Rationale: The external reviewers recommended that the Center establish an Advisory Committee or Consortium that would reflect major Georgia health policy stakeholders

much like the Center's original advisory board. The Center wants to facilitate the development of this group of stakeholders to collaboratively address health issues in Georgia. The roles of the Advisory Committee or Consortium will be to clarify, balance, and address Georgia's health priorities based on evidence and to examine issues in combination, putting them into a larger context in order to devise new problem-solving approaches. The current, three-year Woodruff grant to implement a comprehensive, consistent, and policy-relevant educational initiative for legislators will help inform the work of the group. The Center will: convene the group, facilitate the development of a vision and framework, create a mechanism to inform policy makers, and develop health policy workshops and educational materials tailored to different constituent groups. The Center will seek private and public funding to establish and provide ongoing support of this Advisory Committee or Consortium.

***Requested University Support:* None - the Center will seek private and public funding to establish and provide ongoing support for the Advisory Committee.**

Action 2: Expand data capacity.

Rationale: The external reviewers also recommended that the Center expand its data capacity and functions. The Center has expertise analyzing Medicaid and SCHIP administrative data, utilizing other state and national datasets on an ad-hoc basis, and collecting primary data including vast amounts of qualitative data from Georgians in an effort to answer policy relevant questions. The Center plans to expand its data capacity by strengthening partnerships with key public and private data collection agencies and systematizing its primary data collection activities to ensure relevant health trend data is available to inform community and state-level health planning. On a regular basis, the Center also plans to continue its excellence in the area of data and information translation to a broad audience of stakeholders. This includes educating the public about health status, health conditions, root causes of poor health, health-related behaviors, health insurance coverage, and access to and use of health care services in Georgia. In addition to expanding the Center's capacity for quick turn around policy analysis, the increased access to data could be used by staff, faculty, and doctoral students for expanded research opportunities.

***Requested University Support:* None - the Center will seek private and public funding to expand data capacity.**

Goal: Become a leader in health policy research.

Action 1: Hire an Associate Director for the Center who will also hold a tenure-track faculty position in an AYSPS Department.

Rationale: The Center needs to more clearly define its primary areas of research interest and focus. To date, the Center has developed a national reputation for its service work in rural community health systems development. This represents a clear focus area for exploring research opportunities. Child health, community-based participatory research,

evaluation, and public and private coverage represent other areas of potential focus. A tenure-track Associate Director will strategically set the Center's research agenda, direct the Center's research activities, and monitor research quality. By aligning the Center's current projects with the research agenda, the Associate Director will lead the effort to translate the Center's project-specific knowledge and policy relevant findings into the academic literature, thus addressing a major impediment for scholarly dissemination of the Center's work as identified by the internal and external reviewers. This individual will also serve on the AYSPS and University academic committees, mentor senior and junior-level Center staff, and enhance collaboration efforts with Departments by teaching masters and doctoral students.

Requested University Support: \$175,000 per year

Action 2: Hire a senior health policy researcher who will also hold a tenure-track faculty position in an AYSPS Department.

Rationale: The Center is well positioned to expand its research productivity by building on its past and current work. Doing so, however, requires a careful strategy to ensure that the Center's current core capacity, comparative advantage, and expectations of key constituencies are not undermined or lost. The external reviewers emphasized that any expanded research and/or educational role for the Center should be additive and not substitute for the Center's current service role and capacity. A senior-level, tenure-track health policy researcher is critical to fulfilling the recommendation to be additive and not transformative. Such an individual will significantly enhance research capacity, build "areas of excellence" and, by creating linkages to Department faculty and mentorship with doctoral students, increase the synergy among the Center and both the Economics and PAUS Departments.

In addition to enhancing research capacity, the health policy researcher will teach master's and doctoral students. Having a tenure-track health policy faculty member will not only attract master's levels students from other GSU schools, departments, and institutes (e.g., Sociology, Health Administration, Public Health) but also introduce them to health policy research and educational opportunities available to AYSPS doctoral students in Economics, PAUS, and the joint PHD program between Georgia Tech and AYSPS. In essence, a senior level tenure-track faculty member will positively impact the doctoral student enrollment at AYSPS in terms of number of students, enhancement of curriculum, and quality of research opportunities.

Requested University Support: \$120,000 per year

Action 3: Provide three course releases for faculty.

Rationale: There are times when the Center has projects that complement its research agenda, align with a faculty member's expertise, and have a high probability for publication. However, due to the requirements of grant deliverables in its current service orientation, the Center does not have sufficient time to translate the work into scholarly

publications. Course releases are a win/win because they engage faculty more fully in the work of the Center and increase the quality and quantity of the Center's published research.

Requested University Support: \$42,000 per year

Action 4: Provide research releases for GHPC Senior Research Associates

Rationale: As identified by both internal and external reviewers, the majority of Senior Research Associate (SRA) staff time is spent on deliverables associated with grants and contracts by conducting activities that range from applied research and evaluation to service such as planning and program design, facilitation, and technical assistance. Contract deliverables require a fairly quick turnaround time. Covering 20 percent of each of the five SRAs' salaries so that time is spent on research activities will allow the SRAs to maintain a balance between client needs and scholarly research.

Requested University Support: \$180,000 (1.5 FTE) per year

Action 5: Provide Graduate Research Assistantships for 5 doctoral students and 10 masters students.

Rationale: The internal and external reviewers recommended that the Center provide research opportunities for doctoral students. Increasing the number of doctoral and masters level students engaged will increase the research capacity of the Center. Providing competitive support to them will significantly enhance the Center's ability to attract top graduate students to AYSPS.

Requested University Support: \$150,000 (5 doctoral students @ \$20,000/yr and 10 masters students @ \$5,000/yr)

Goal: Be nationally recognized as a leader in innovative approaches to community-based health improvement.

Action 1: Hire a doctoral-prepared community-based participatory researcher.

Rationale: The Center intends to work in partnership with a pilot community in Georgia to design, implement, and evaluate a comprehensive, long-term transformative intervention that will improve health and well-being. The Center's nationally recognized technical assistance approach, developed through extensive experience working with hundreds of communities throughout the United States, will help identify and overcome system-level obstacles as well as provide the vision to address health improvements in a broader context. It is the Center's expectation that much of this work can be funded with public and private grants and contracts. However, the community can be used as a "learning laboratory" to test new interventions and learn about ways to increase community engagement. A nationally-recognized senior researcher, specifically trained

in community-based participatory research, is needed for this innovative work with the community to document and translate findings.

Requested University Support: \$120,000 per year

In summary, these additional resources will attract and pay for excellent faculty and staff, attract more graduate students, and provide flexibility to serve State leadership and policymakers. Modest investments in faculty and support of research activities will provide synergy with both the Economics and PAUS Departments and help AYSPS achieve one of its main goals in the 2002-2007 Strategic Plan: “Advance academic scholarship and add new knowledge that will benefit the policymaking community.” With additional doctoral-prepared staff (with faculty appointments), the Center will be positioned to expand its research productivity and contribute to University health-related programs. With tenure track faculty in the positions of Associate Director and health policy researcher, the School and the University could more actively leverage the extensive relationships the Center has cultivated with state and community agencies to enrich and expand educational offerings for both on-campus and off-campus students.

Budget and Timeline

**Georgia Health Policy Center
Academic Program Review
5-year Budget Request***

Request	Qty	2008	2009	2010	2011	2012
Associate Director (tenure track)		\$175,000	\$182,000	\$189,280	\$196,851	\$204,725
Sr. Health Policy Faculty (tenure track)		\$120,000	\$124,800	\$129,792	\$134,984	\$140,383
Faculty Course Release <i>(approximately \$14,000 per release)</i>	3	\$42,000	\$43,680	\$45,427	\$47,244	\$49,134
Sr. Research Associate Release (1.5 FTE)		\$180,000	\$187,200	\$194,688	\$202,476	\$210,575
Graduate Research Assistantships						
• Doctoral Students (\$20,000/yr)	5	\$100,000	\$100,000	\$100,000	\$100,000	\$100,000
• Master Students (\$5,000/yr)	10	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000
Sr. Research Associate (CBPR)		\$120,000	\$124,800	\$129,792	\$134,984	\$140,383
Totals:		\$787,000	\$812,480	\$838,979	\$866,538	\$895,200

*Note: 2009-2012 reflect a 4% cost-of-living increase.