QUARTERLY REPORT
September 30, 2001 – December 31, 2001

Evidence-Based Practice for Public Health

TS-0734

Principal Investigator:
Elaine R. Martin
Director of Library Services
elaine.martin@umassmed.edu
508-856-2399

Project Coordinator:
E. Hatheway Simpson
e.hatheway.simpson@umassmed.edu
508-856-3594

The Lamar Soutter Library
University of Massachusetts Medical School
55 Lake Avenue North
Worcester, MA 01655
Introduction

This report covers the first quarter of the Evidence-Based Practice for Public Health Project, September 30, 2001 through December 31, 2001. The project got off to a late start. We did not receive the official contract documents from the Association of Teachers of Preventive Medicine (ATPM) until December 1, 2001. We received notification at this time that we needed Institutional Review Board (IRB) approval regarding human subjects, and applied to University of Massachusetts Medical School’s Committee for the Protection of Human Subjects in Research for IRB approval. The Grants and Contracts Office at the University of Massachusetts Medical School returned the signed contract documents December 12, 2001 and requested that the official signed documents from the Centers of Disease Control and Prevention (CDC) and the ATPM be returned to the University of Massachusetts Medical School. We did not receive the final subaward agreement until December 28, 2001. Due to this delay we could not hire a Project Coordinator until January 1, 2002. Despite this delay, we spent the time writing a job description for the Project Coordinator, processing the request for hire through the Human Resources Department at the University of Massachusetts Medical School, posting the position, receiving resumes, and interviewing candidates, pending official funding.

Adherence and Progress Towards Achieving Goals and Objectives

We hired Elizabeth Hatheway (Hathy) Simpson as Project Coordinator (see resume, Attachment 1). Hathy worked as part of the Reference Staff at the Lamar Soutter Library for one year prior to being hired as the Project Coordinator. She holds a Master’s Degree in Public Health from the University of Connecticut.

We held our first planning meeting on December 19, 2001 with Elaine Martin, Principal Investigator; Hathy Simpson, Project Coordinator; Dr. Roger Luckmann, Assistant Professor in the Department of Family and Community Medicine, who will serve as an expert advisor; and Jim Comes, Associate Director of Library Information Services. We discussed the project and some initial tasks that we would undertake related to the specified objectives outlined in the research plan. We also discussed revision of the timeline given the delays cited above.

We applied to the University of Massachusetts Medical School’s Committee for the Protection of Human Subjects in Research for IRB approval regarding human subjects. We received notification on January 4, 2002 that the research plan was approved by Expedited Review on December 12, 2001, and expires on December 12, 2002 (see Attachment 2, IRB Approval). We sent a copy of the IRB approval to the ATPM and to Jocelyn Rankin, the Technical Advisor on January 8, 2002.
Preliminary Plans for the Subsequent Quarter

Preliminary plans for the subsequent quarter respond to the first four objectives of the research plan.

1. Purchase computer and office equipment for the Project Coordinator.

2. Have a conference call meeting with Jocelyn Rankin, the Technical Advisor, to discuss the tasks of the project. Discuss how the preliminary tasks from the meeting with Roger Luckmann will tie in with the original objectives from the research plan. Discuss timeline.

3. Identify top public health journals. We will examine the Institute of Science (ISI)’s *Journal Citation Reports Science Edition 2000* ranking of public health journals by impact factor. We will also determine how these journals are categorized by Index Medicus. If the database from the Core Public Health Journal Project ([www.phha.mlanet.org/corejournal.html](http://www.phha.mlanet.org/corejournal.html)) is made available, we may include journals identified as “core” in our list. Jocelyn Rankin will help by providing us with a list of high-use journals at the CDC Information Center. We will determine which journals are available (in print or electronic form) at the Lamar Soutter Library at the University of Massachusetts Medical School. (Relates to *Objective 1: To identify at least three models of evidence-based literature approaches to clinical medicine and review their applicability to the literature of public health.*)

4. Search for and examine public health websites. We will look at websites that provide public health information and review them for their design elements and content in order to generate ideas for the website that we will develop for the project. We will identify any websites that provide evidence-based public health information, and identify any existing evidence-based projects aimed at assessing the quality of public health literature. (Relates to *Objective 2: To identify any existing preliminary models or products for assessing the quality of public health literature.*)

5. Determine what area of public health we will focus on. We are considering focusing on the information needs of public health practitioners at the local and state level. (Relates to *Objective 4: To identify a narrow subject area and pilot test it within the models (products) identified for applicability within public health.*)

6. Begin to identify at least three models of evidence-based literature approaches to clinical medicine and review their applicability to the literature of public health. (Relates to *Objective 1: To identify at least three models of evidence-based literature approaches to clinical medicine and review their applicability to the literature of public health.*)

7. Begin to evaluate the identified evidence-based models for their effectiveness, and identify their pros and cons, strengths and weaknesses, etc. (Relates to *Objective 3: To evaluate the models/products for effectiveness; identify their pros and cons, strengths and weaknesses; scalability; usefulness; etc.*)
Problems, Risks, Questions, Concerns That Have Impacted Progress

As stated in the introduction, our biggest problem was the late start of the project due to the late arrival of approval documents needed to start the project. The University of Massachusetts Medical School Grants and Contracts Office could not give us an account number to charge staff and materials to until December 28, 2001. It was not until we received the first official letter on December 1, 2001, that we realized that we needed Institutional Review Board (IRB) approval regarding human subjects. We spent the month of December applying to the University of Massachusetts Medical School’s Committee for the Protection of Human Subjects in Research. We received notification on January 4, 2002 that the research plan was approved by Expedited Review on December 12, 2001, and expires on December 12, 2002 (see Attachment 2, IRB Approval). We did not receive the final subaward agreement until December 28, 2001.

We have also found that before we begin to identify and evaluate clinical evidence-based models and review their applicability to public health literature, we need to do some initial tasks that were not part of the original research plan. These include an inventory of top public health journals and websites, as well as identifying the area of public health that we will concentrate on.