QUARTERLY REPORT

September 30, 2002 – December 31, 2002

Evidence-Based Practice for Public Health

TS-0734

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Introduction

This report covers the fourth quarter of the Evidence-Based Practice for Public Health Project, September 30, 2002 through December 31, 2002.

Adherence and Progress towards Achieving Goals and Objectives

1. Elaine Martin, the Principal Investigator, attended the National Library of Medicine (NLM) Public Health Partnership Steering Committee Meeting on October 3, 2002 at the National Library of Medicine, Bethesda, MD and gave a presentation on the project. She discussed the rationale and background of the project, a description of the project to date, goals of the project, and the process used to meet the goals. Representatives from the American Public Health Association, the Health Resources and Services Administration, the Centers for Disease Control and Prevention, and the NLM were there and reacted favorably to the project (Attachment 1). This relates to Objective 6: To develop a set of “lessons learned” and recommendations for developing a “preferred” model (database, electronic publication and website), and Objective 7: To design an outreach and training program to increase the awareness of “evidence-based practices” in public health and encourage the use of the web products developed as a result of this study among public health practitioners.

2. We met with Dr. Roger Luckmann, Assistant Professor in the Department of Family and Community Medicine, an expert advisor to the project, on October 4 and October 9, 2002. We prepared for our visit and presentation to the Centers for Disease Control and Prevention (CDC) Information Center Advisory Committee. We examined various clinical medical models of information dissemination and reviewed their applicability to public health information dissemination. Our work with Dr. Luckmann relates to the following objectives in the research plan: 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, and Objective 3: To evaluate the models/products for effectiveness; identify their pros and cons, strengths and weaknesses; scalability; usefulness; etc.

3. Elaine Martin, Roger Luckmann, and Hathy Simpson, the Project Coordinator, traveled to the CDC Information Center in Atlanta, Georgia on October 16, 2002. They met with Jocelyn Rankin, the Technical Advisor to the project and members of the CDC Information Center Advisory Committee. Elaine Martin gave a presentation on the background and rationale of the project, its progress to date, and future goals of the project. Her presentation included information about the identification of the knowledge domains and subdomains of public health and the process used to identify public health journals associated with those domains (Attachment 2). Roger Luckmann gave a presentation entitled, “Models of Information: Summary, Synthesis, and Dissemination in Clinical Medicine”. Dr. Luckmann’s presentation included examples of evidence-based medicine models and their potential application to public health information dissemination (Attachment 3). The CDC librarians and researchers present at the meeting were very positive about the project, and liked the concept of matching public health journals with the identified knowledge domains of public health. They thought this would be tremendously helpful in identifying literature in specific public health subject
areas. The minutes of the meeting are attached (Attachment 4). The visit to the CDC relates to the following objectives in the research plan: Objectives 1 and 3 as described above, and Objective 2: To identify any existing preliminary models or products for assessing the quality of public health literature.

4. We submitted an abstract to the Medical Library Association (MLA) for a poster presentation on the project for MLA Annual Meeting in May 2003 (Attachment 5). This relates to Objectives 6 and 7 as described above.

5. We continued to match the list of public health journals previously created with the identified knowledge domains of public health. We reviewed and revised the Knowledge Domains and Subdomains of Public Health (Attachment 6). This work relates to Objective 1 as described above.

6. We updated the project’s website, [http://library.umassmed.edu/ebpph/](http://library.umassmed.edu/ebpph/) (Attachment 7). We added links to the two PowerPoint presentations presented to the CDC in October 2002. We also added Internet links to our list of Public Health Journals and updated the list with new journals identified by the Core Public Health Journals Project, Version 0.9. This is related to Objectives 6 and 7 as described above.

7. Hathy Simpson, the Project Coordinator, attended the American Public Health Association’s (APHA) Annual Meeting in Philadelphia, November 9-13, 2002. She attended two courses related to the project: 1) Evidence-based Decision Making in Public Health: A How-to on Training, taught by Karen Peters, DrPH, and Edie Sternberg, MPH, CHES from the University of Illinois at Chicago, School of Public Health; and 2) Interpreting and Reporting Public Health and Medical Research: Techniques and 13 Key Questions. She also attended various scientific sessions related to evidence-based public health (EBPH) and met representatives from the National Library of Medicine, the Public Health Foundation, the Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials (NACCHO), the National Guidelines Clearing House, and the Agency for Healthcare Research and Quality (AHRQ). Information gathered at the APHA meeting will be used to identify existing EBPH resources. This relates to Objectives 1, 2, 3, and 7 as described above.

8. Hathy Simpson met with Dr. Sharon Telleen, Research Associate Professor of Public Health and Visiting Research Associate Professor, Department of Sociology at the University of Illinois at Chicago, at the APHA meeting in November 2002. Dr. Telleen is serving as an expert advisor for the project. They reviewed the project, existing sources of EBPH information, and the information needs of public health professionals. The work with Dr. Telleen relates Objectives 2, 6, and 7 as described above.

9. The project was re-reviewed by the University of Massachusetts Medical School Committee for the Protection of Human Subjects in Research. The study was reapproved effective December 12, 2002 (Attachment 8). Copies of the IRB approval documentation were sent to the Association of Teachers of Preventive Medicine (ATPM) and to Jocelyn Rankin at the CDC Information Center on December 23, 2002.
Preliminary Plans for the Subsequent Quarter

1. Continue to identify online and print literature associated with the knowledge domains of public health. We are using the previously created list of public health journals that we prepared by combining the lists of top 25 public health journals by impact factor, the most frequently requested journals through the CDC Information Center’s Document Delivery Service, the most frequently cited journals from pre-formulated search strategies of the Healthy People 2010 Information Access Project, and the Core Public Health Journals Project. We are matching each journal on the list with an identified knowledge domain of public health. This 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.

2. Identify public health bibliographic databases associated with the knowledge domains of public health. We will match the previously identified public health databases with identified knowledge domains of public health. This relates to Objective 1 as described above.

3. Review and revise the identified knowledge domains of public health as we match the journals and databases to the knowledge domains. We also plan to add the Centers at the CDC as a public health source to the chart we created to determine the knowledge domains of public health. We plan to match the identified knowledge domains with Medical Subject Headings (MeSH) from the National Library of Medicine. This relates to Objective 1 as described above, and to Objective 5: To develop a set of “filters” for retrieving high levels of evidence within the published public health literature.

4. Continue to identify models of evidence-based literature approaches to clinical medicine and review their applicability to the literature of public health. We are in the process of preparing an evaluative chart that will describe the features of the identified clinical evidence-based models. We will identify the characteristics of clinical EBM models and determine if any of these characteristics can be applied to a model for evidence-based public health. This relates to Objective 1 as described above, and to Objective 3: To evaluate the models/products for effectiveness; identify their pros and cons, strengths and weaknesses; scalability; usefulness; etc.

5. Continue to identify existing evidence-based public health resources. We will prepare a chart describing the features of the identified EBPH models; assess their accessibility, pros and cons, strengths and weaknesses, and usefulness for finding evidence-based public health information. This relates to Objective 2: To identify any existing preliminary models or products for assessing the quality of public health literature.

6. Determine what specific area(s) or knowledge domain(s) of public health we will focus on for the remainder of the project. After we have matched the public health journals and bibliographic databases to the identified knowledge domains we will know what the available sources of public health information are for each identified knowledge domain of public
health. We will use this information to choose potential subject areas of public health for the project and to determine the information needs of public health practitioners within the potential areas of public health. We will solicit feedback from our project experts, the CDC Advisory Committee, and other public health professionals in order to select the area on which to focus the rest of the project. We will finalize our selection based on this feedback. This aim relates to **Objective 4: To identify a narrow subject area and pilot test it within the models (products) identified for applicability with public health.**

7. Determine the information needs of public health workers and how they would prefer to access evidence-based public health information. We plan to determine the information needs of public health workers through focus groups, interviews, and/or surveys and questionnaires to state and local public health professionals. This relates to **Objective 4** as described above.

8. Start to identify any filters that may exist to identify evidence-based public health literature. For example, we will examine the Healthy People 2010 Information Access Project’s pre-formulated search strategies. This relates to **Objective 5** as described above.

9. We will start to develop a course on evidence-based public health for librarians. We will collaborate with other public health librarians and plan to teach a course at the 2004 MLA Annual Meeting. This relates to the education and training component of our project as stated in **Objective 7: To design an outreach and training program to increase the awareness of “evidence-based practices” in public health and encourage the use of the web products developed as a result of this study among public health practitioners.**

**Problems, Risks, Questions, Concerns That Have Impacted Progress**

Public Health is a multidisciplinary field ranging broadly across the health care spectrum. In order to develop an evidence-based tool appropriate to public health, it is necessary to identify the knowledge domains of public health and the public health literature and databases associated with each domain. These tasks were not part of the original research plan but are necessary to undertake in order to create an evidence-based tool appropriate to public health.

There is disagreement amongst public health experts, associations, accrediting bodies, etc. as to what the knowledge domains of public health should be. Coming to consensus amongst project advisors and constituents has been a difficult, labor-intensive task (taking longer than we anticipated). However, we feel we have made substantial progress in this endeavor and that it was worth the time and effort spent. The work we have put into this task will ultimately benefit the project outcome.

There are various ways to define “evidence” in public health. Public health evidence may include information from expert opinion, journal literature, books, government and foundation reports, conference proceedings, public health organization newsletters, and Internet sources. We will need to investigate further what constitutes public health evidence.