Community Preparedness and Response Breakout Session

March 8, 2005 James Conference Room

Pamela Diaz, M.D. Chicago Department of Public Health, Infectious Diseases and Public Health Preparedness

- C1: Public Health and Medical Surveillance Systems
- C2: Rapid Clinical Diagnostic Capabilities
- C3: Environmental Detection and Decontamination
- C4: Risk Assessment and Management Strategies
- C5: Critical Environmental Infrastructure Systems and Process
- C6: Public Health, Mental Health, and Medical Response Systems
- C7: Human Migration Issues
- C8: Risk Perception and Protective Behaviors
- C9: Support Frontline Personnel Involved in Health Protection Functions

- C10: Risk Management Strategies
- C11: Rapid and Accurate Risk Information and Public Health Recommendations
- C12: Public Health Workforce
- C13: Effective Communication Strategies
- C14: Exposure and Impact Data
- C15: Strategic Communications Technology
- C16: Community Actions
- C17: Local and Regional Operational Strategies
- C18: Community and Regional Response

Ideas you want to keep

High priority:

- C1 (Public Health and Medical Surveillance)
 - C7 (Human Migration issues) and C14 (Exposure and Impact Data) became integrated with C1
- C6 (Public Health, Mental Health, and Medical Response Systems)
 - C12 (Public Health Workforce) became integrated with C6
- C10 (Risk Management Strategies)
 - C8 (Risk Perception and Protective Behaviors) became integrated with C10
- C11 (Rapid and Accurate Risk Information and Public Health Recommendations)
 - C13 (Effective Communication Strategies), C15 (Strategic Communications Technology), and C16 (Community Actions) became integrated with C11
- C17 (Local and Regional Operational Strategies)

Ideas you want to keep (cont.)

Medium priority:

- C9 (Support Front-line Personnel Involved in Health Protection Functions)
- C12 (Public Health Workforce)

Ideas you want to revise or remove

Integrations:

- Combine C7 (Human Migration Issues) and C14 (Exposure and Impact Data) with C1 (Public Health and Medical Surveillance Systems)
- Combine C12 (Public Health Workforce) with C6 (Public Health, Mental Health, and Medical Response Systems)
- Combine C13, C15, and C16 with C11 (Rapid and Accurate Risk Information and Public Health Recommendations)

Ideas you want to revise or remove (cont.)

Remove:

- C2 (Rapid Clinical Diagnostic Capabilities)
- C3 (Environmental Detection and Decontamination)
- C4 (Risk Assessment and Management Strategies)
- C5 (Critical Environmental Infrastructure Systems and Processes)
- C18 (Community and Regional Response)

Ideas you want to revise or remove (cont.)

General revisions:

- Need to add "evaluate effectiveness" to research categories across the board
- Regarding "vulnerable populations"- should be "all hazards, all people, all the time"- all topics need to address entire population
- Evaluate and/or incorporate the short and long term psychological and behavioral aspects across the research agenda.

Specific revisions:

- Add surge capacity element to C6 (Public Health, Mental Health, and Medical Response Systems)
- Develop strategies to expand the public health workforce to C12 (Public Health Workforce)

Ideas you want to add

Our top 5 research ideas (old & new)

- C1/C7/C14 (C1: Public Health and Medical Surveillance Systems)
- C6/C12 (C6: Public Health, Mental Health, and Medical Response Systems and Public Health Workforce)
- C10 (Risk Management Strategies)
- C11 (Rapid and Accurate Risk Information and Public Health Recommendations)
- C17 (Local and Regional Operational Strategies)

Comments on the Agenda Development Process

Overall Process:

- Share common practice for analyzing questions across workgroup questions
- Identify common language and definition and categorization of terms across the agenda items
- "Futures goals" across the agenda

Comments on the Agenda Development Process

Logistical:

- More discussion time
- Hand out starter list before arrival (via email)- explain beforehand what is needed
- Consensus building software- laptops for group sessions
- Tape or transcribe group work
- Group research goals into categories
- Spend less time on CDC process and organizational chart
- Modeling of meeting according to new organization of CDC stymies the ultimate goal of universality of the agenda.

Environmental and Occupational Health and Injury Prevention (EOHIP) Breakout Session

March 8, 2005

Charleston Conference Room

David Wegman, University of Massachusetts Lowell, Dean



- Environmental Risk Factors
- Chemical Mixtures
- Bio-Monitoring Methods and Tools
- Environmental Health Interventions
- Built Environment and Health
- Lead Exposure and Health
- Environmental Data and Information Systems
- Injury and Violence Prevention Interventions
- Injury Translation and Dissemination Research
- Injury Related Health Disparities
- Risk and Protective Factors of Adolescent Unintentional Injury



- Risk and Protective Factors of Adolescent Violence and Suicidal Behavior
- Trauma Systems Research
- Parenting and Injury Prevention in Children/Adolescents
- Connection Between Multiple Forms of Violence
- Occupational Injuries
- Occupational Respiratory Disease
- Musculoskeletal Disorders (MSDs)
- Workplace Control Technologies and Personal Protective Equipment
- Organization of Work
- Work Related Skin Exposure and Disease



Ideas you want to keep

- E5 Built Environment and Health
- Most Others But revised

Chose to focus on cross-cutting priorities assuming existing priorities continue



- Broaden topics (and then merge some topics)
 - E1 → Risk Factors for O&NO Injury and E&O
 Illness (E2 => Mixtures, E20)
 - E16 → Causality of O&NO Injury and E&O Conditions (E17, E18, E21)
 - E4 → E&O & Injury Interventions (include ½ of E19, E20)
 - E3 → Include interpretation of biomonitoring (Continued)



- Broaden topics (and then merge some topics)
 - E7 → E&O & Injury Data Link, Track, and Interpret (E10, E13, burden assessment methods)
 - E8 → Injury and Violence assessment, prevention, interventions disparities (E10, E11, E12, E14, E15)
 - E9 → Translation and Dissemination of E&O and Injury Research

- E19 PPE → Preparedness
- E6 Lead Subsumed under general intervention topic
- E13 Trauma Systems Research –
 Subsumed under Data Tracking
- E10 Disparities Criteria to be included in all OE & Injury Research



Ideas you want to add

- Delivery of O&E & Injury health services at state & local level
 - Evaluation of service, capacity, cross-training, identity
- Global climate changes impact
- Risk communication
 - Effectiveness, networking
- Integrate occupational and general health in workplace (include family issues)



Our research ideas (old & new)

- E1: O&E Risk Factors (15)
- E22: Delivery of O&E & Injury health services at state & local level (14)
- E4: O&E Interventions (13)
- E8: Injury & Violence (10)
- E16: O&E Illness & Injuries (10)
- E7: O&E Data (10)
- E5: Built Environment (9)
- E25: Integrate occupational and general health in workplace (include family issues) (9)
- E9: Translation & Dissemination (8)
- E24: Risk communication (8)
- E23: Global climate changes impact (7)
- E3: Biomonitoring (5)



Comments on the Agenda Development Process

- Consider consumer groups and industry invitees
- Plenary: Prioritize existing vs. cross-cutting
- Provide materials beforehand draft list, previous session results, description of process, other research priority lists (e.g., NORA, NCIPC, ATSDR, etc.)
- Provide summary reports on web
- Address cross-cutting issues

Global Health Breakout Session

March 8, 2005
Dewey III Conference Room
Stephen Marks,
Harvard School of Public Health

- Social Capital and Health Outcomes
- Standardization of Global Health Data
- Occupational Health in International Settings
- Prevention and Control of Injuries in the Developing World
- Complex Humanitarian Emergencies
- Public Health Preparedness in International Settings
- Health Marketing in International Settings
- Micronutrient Malnutrition
- Evaluation of Intervention Cost-Effectiveness
- Public Health Consequences of Exploitation of Women and Children

- Global Disease Prevention with Immunization
- Other Endemic and Emerging Global Infectious Diseases of Global Significance
- Global HIV/AIDS, Tuberculosis (TB), and Sexually Transmitted Diseases (STDs)
- Non-Communicable Diseases in the Developing World
- Orphans and Other Vulnerable Children
- Safe Water
- Millennium Development Goals- Maternal & Under-5 Mortality

Ideas you want to keep

- All of the ideas had merit but revisions were made and concerns were expressed that resources were insufficient to cover all areas
- Standardization of data as a cross-cutting issue for each global health research idea and as a stand alone
- Research should be complementary and coordinated with other US and international organizations
- Millennium Development Goals are important and need to encompass more than G17

- G1 revised to include "Macro-determinants of Health, especially poverty and equity"
- G5 should include refugees and other displaced persons
- Remove G6, move emerging disease component to G12 and disaster emergencies to G5
- G8 revised to include nutrition, access to food, and food safety
- Consider re-conceptualization around communicable, non-communicable, and behavioral/social causes of ill health

Ideas you want to add

- Environmental disruption and impacts on health, looking at different scales
 - Clean air
 - Environmental change such as global warming
 - Ecological integrity
- Production, marketing, consumption, and preventative strategies of tobacco and other addictive substances
- Ethical issues in health research

Our top 5 research ideas (old & new)

- Endemic and Emerging Infectious Diseases and Chronic Diseases of Global Significance
- Environmental Disruption and Impacts on Health
- Global HIV/AIDS, Tuberculosis, and Sexually Transmitted Diseases
- Water Safety and Accessibility
- Global Disease Prevention with Immunization

Comments on the Agenda Development Process

Prior to Washington DC Meeting

- Information about selection and assignment process
- Information about what is expected
- Advance documentation

Washington DC Meeting

- Revisions should defined before prioritization
- Greater clarity and avoidance of overlap of research agenda items (e.g. better categorization of items)
- Need LCD projector

Health Information and Services Breakout Session

Rappahannock Conference Room
Jon Kerner, NCI

Health Information and Services

- Statistical and Data Science
- Data Collection
- Integrating Health and Policy Data
- Analytical Methods
- Data Mining
- Decision Support
- Information & Data Visualization
- Electronic Medical Records
- Knowledge Management
- Communications and Alerting Technologies

Health Information and Services

- Informed Consumer Health Choices
- Health Communication
- Customizing Health Communication Campaigns
- Public Health Brand
- Integrated Health Marketing Programs
- Health Literacy
- Health Awareness to Health Action
- Message Bundling

Ideas you want to keep

- Electronic Medical Records
- Statistical and Data Science
- Knowledge Management
- Analytical Methods
- Message Bundling
 Integrating Health and Policy Data
 Communications and Alerting Technologies

Health Information and Services

Ideas to focus on: Electronic Medical Records

- Very important, large agenda item.
 Revise to include federal, state, local, and private partnerships
- Consider ethics, e.g. privacy
- Used to inform population-based decisions (not just individual)

Ideas to focus on: Statistical and Data Science

- A lot of people liked
- Closely related to data collection, data mining
- Reword delete software development and replace with software implementation and/or utilization
- Must include standards, quality assurance
- Combining multiple data sets
 – confidentiality!
- CDC should take the lead here

Ideas to focus on: Knowledge Management

- Developing cross-agency partnerships to share knowledge is essential, but difficult.
- Who defines what is relevant knowledge? Must be relevant to the decisions public health practitioners are making; otherwise, won't be used
- Synthesized information. Must have proper tools for reporting.
- Self-promotion vs. health promotion: don't link with branding effort!

Ideas to focus on: Analytical Methods

- CDC should have major involvement as health laboratory of the nation, so should take lead on detection and monitoring
- Strength of the CDC
- Pattern recognition linked to data visualization efforts with other agencies

Ideas to focus on: Message Bundling

- What health behavior change messages do you bundle for which audiences?
- What to bundle depends on partners
- Determine both needs AND wants
- Social marketing research falls out from this
 - CDC should be a leader in this, not dissemination

Health Information and Services

Ideas you want to add

- Dissemination & Implementation Research in Public Health Practice
 - what dissemination approaches work to increase the implementation of guide recommendations
 - how to monitor the implementation of EBIs
- Return on Investment
 - -assess value of research, implementing and benchmarking, evaluating how CDC coordinates and monitors research agenda

Health Information and Services

Our top 5 research ideas (old &new)

- Statistical and Data Science (9)
- Analytical Methods (7)
- Electronic Medical Records (5)
- Knowledge Management (4)
- Message Bundling (4)
- Dissemination & Implementation Research in Public Health Practice (new) (4)

Health Information and Services

Comments on the Agenda Development Process

- Sending research agenda items in advance for review
- More state, local representation at this meeting
- Clarify whether CDC or public health agenda
- Why weren't federal partners included on the workgroup?

Health Promotion Breakout Session

March 8, 2005
Dewey Conference Room
Joann M. Lindenmayer, DVM, MPH
Rhode Island Department of Health
Epidemiologist

Ann-Marie Nazzaro, Ph.D
Direction of Education
National Hemophilia Foundation
PI/Project Director for Cooperative Agreement Hereditary Blood Disorders Group

- Optimal Child Development
- Early Identification of Developmental Disabilities
- Healthy Birth Outcomes
- Preconception (Pre-Pregnancy) Care
- Health Among Persons with Disabilities
- Integrated Case Management Surveillance System for Developmental Disabilities
- Epidemiologic Studies on Child Development
- Use Genetics to Bridge Preventive Medicine and Public Health Research
- Integrate Human Genomics into Public Health Surveillance Systems and Research Studies

- Develop Family History as a Tool for Prevention
- Develop Models for Incorporating Education and Community Engagement into Population-Based Genomics Research
- Improving Maternal and Infant Health
- Improving Children's Health
- Improving Adolescent Health
- Improving Adult Health
- Improving Health of Older Adults
- Healthy Communities
- Care for Children with Chronic Conditions

- The National Children's Study
- Genetic Causes of Blood Disorders and Birth Defects

Ideas you want to keep

- All but one theme were kept in some form
 - Some were combined with others
 - Some were considered tools and were subsumed under others
 - National Children's Health Study (H19)
 - Integrated Case Management for Developmental Disabilities(H6)
 - Some were modified (language, scope)

Ideas you want to revise or remove

- H1 and H2 (Combine)
 - Add prevention of birth defects and secondary conditions to research description
- H13, H14, H15, H16, H17 (Cluster)
 - Cluster to allow a wider focus that will include the transitional issues between life stages and the inter-relation among the life stages within a community and family
- H8, H9, H10, H11, and H20 (Cluster)
 - Cluster to identify the interactions of the human genome and the environment to identify disease patterns and determine the effectiveness of prevention and treatment strategies across the life span
 - Add genetic causes of blood disorders and birth defects to the research areas

Ideas you want to revise or remove

- H3 and H12 (Cluster)
 - Combine and change research theme title to H12 (Improving Maternal and Infant Health) to optimize birth outcomes for both mother and baby
 - Add concept of participatory fathering
- H3 (Revise)
 - Add two new areas of research
 - Developing and implementing quality assurance procedures for new tests included in newborn screening panels
 - Investigating, refining, and implementing detection systems for new/expanded conditions that can be included in newborn heel stick screening
- H16 (Revise)
 - Delete "decrease healthcare costs" from the research description
- H18 (Remove)
 - Provide data to support the business case for coordination of care for children with chronic conditions (more appropriate as Cross-Cutting Issue X12)

Ideas you want to add

H21: Improving Women's Health

Establish, monitor, and routinely evaluate a comprehensive research-to-practice effort to promote women's health and well-being throughout the lifespan, including but not limited to the child-bearing years, so that a woman's overall health is maintained and improved.

Ideas you want to add

H22: Healthy, Empowered Communities (Supplants H17)

Engage community members to assess community health status in new, comprehensive ways.

Identify economic, social, legal, physical environment (availability of healthy, affordable foods, built environment) and health behavior factors (Substance abuse, others) that affect the health status of a community.

Engage new partners, particularly those with regional and urban planning expertise, in addressing barriers to improving community health.

Make sure evidence-based practices are adaptable for diverse ethnic, racial, linguistic, SES and other groups

Ideas you want to add

H23: Improving Men's Health

Base research description and activities from H15 and H16, but change the focus to men's health (e.g. colon cancer, testicular cancer, etc.)

Comments on the Agenda Development Process

- Send research ideas and information about this process to invitees before the meeting
- Build flexibility into the small group process (e.g. shorter introduction time)
- Refine Task 1 process

Infectious Disease Breakout Session

March 8, 2005
Roanoke Conference Room
Beth Sabin,
Asst. Dir. Education & Research, AVMA

- Antimicrobial Resistance
- Applied Genomics
- Behavioral Sciences, Health Promotion, and Prevention Research
- Disease Elimination
- Economic Analyses of Infectious Diseases
- Environmental Microbiology
- Health Disparities and Infectious Diseases
- Immunization Services Delivery Research
- Infectious Disease and Chronic Disease Association
- Infectious Disease Diagnostic Methods

- Infectious Diseases of Vulnerable Populations
- Infectious Disease Surveillance and Response
- Microbial Threats and Emerging Infections
- Patient Safety
- Perinatal and Neonatal Infectious Diseases
- Vaccine Epidemiology and Surveillance
- Vaccine Safety
- Vaccine Supply

Ideas we want to keep

- Antimicrobial Resistance
- Health Disparities & Vulnerable Populations (combined)
- Infectious Disease Surveillance & Response
- Microbial Threats & Emerging Infections
- Vaccines & Immunization Programs (combined)

Ideas we want to revise or remove

(Fewest votes, but *not* suggested for removal)

- Applied Genomics
- Disease Elimination
- Infectious Disease and Chronic Disease Associations

Ideas we want to add

- Integrated Pandemic Infection Control/Treatment (Comprehensive Preparedness Planning)
 - Trials Ready to Treat
- Healthcare Infections (Renaming "Patient Safety")
- Zoonotic Diseases (Separate from Emerging Infections)

Our top 5 research ideas (old & new)

- Focus did not change from the original Top 5 (11-15 votes each)
- Note: Integrated Pandemic Infection Control/Treatment (Comprehensive Preparedness Planning) (9 votes)
- Relative distinction between priority focus areas and others (agenda items with fewest votes received 0-3 votes)
- Approximately 20 voters

Comments on the Agenda Development Process

- Distribute draft starter list in advance (opportunity to read, consider, and gather comments from colleagues)
- Emphasize collaboration with other federal agencies on developing national public health agenda (to avoid duplication, achieve better use of resources)
- Difficult to choose from umbrella themes (more specificity needed)
- Challenge of prioritizing issues that are all important
- Process affects product: List of priorities/voting influenced by mix of participants in breakout sessions

Cross-Cutting Research Breakout Session

March 8, 2005
Potomac Conference Room
Tazima Davis, International Food Information
Council, Program Coordinator

- New Research Methods and Tools
- Data Science and Information Systems
- Disease, Disability, Injury, and Exposure Surveillance
- Burden of Disease
- Eliminating Health Disparities
- Community-Based Participatory Research
- Health Education, Communication, and Marketing
- Systems Research
- Public Health Impact Evaluation
- Translation and Dissemination of Effective Interventions

- Workforce Training and Development
- Economics and Public Health
- Social and Behavioral Sciences in Public Health
- Mental Health and Substance Abuse
- Human Genomics in Public Health
- Public Health Law and Policy
- Ethics in Public Health

Ideas you want to keep

- X5: Eliminating Health Disparities
- X13: Social and Behavioral Sciences in Public Health
- X11: Workforce Training and Development
- X8: Systems Research
- X9: Public Health Impact Evaluation

Ideas you want to revise or remove

Make modifications to X8, X13 and X5

Ideas you want to add

- Research to learn from global, historical, and best & worst practices
- Reaching socially, technologically and economically excluded populations
- Research public health data infrastructure to improve usability and quality
- Trans-disciplinary agenda including research on social and structural determinants of health

Our top 5 research ideas (old & new)

- X5: Eliminate Health Disparities
 - + Reach Socially, Technologically & Economically Excluded Populations
- X13: Social & Behavioral Sciences in PH
 - + Trans-disciplinary Agenda, Research the Root Determinants to Health
- X11: Workforce Training & Development
- X8: Systems Research
 - + Research to Learn from Others (Global, Historical, B&W Practices
 - + Research PH Data Infrastructure to Improve Usability & Quality
- X9: Public Health Impact Evaluation

Comments on the Agenda Development Process

- Compress initial plenary session to 15 minutes by providing a read-ahead
- Devote full day to discussion
- Develop criteria for prioritizing the ideas