

NCI Community Cancer Centers Program Evaluation Oversight Committee Selected Biographies

Mary L. Fennell, PhD - Chair

Mary L. Fennell is professor and chair of the Department of Sociology at Brown University, and is appointed in the Department of Community Health. Dr. Fennell is a senior investigator with the Center on Gerontology and Health Care Research, where she focuses on the connections between the acute and long-term care systems of care. She received her PhD from Stanford University and specializes in the application of organizational theory to health care organizations. She has led or collaborated on more than a dozen externally-funded research projects in organizational change in health care, innovation diffusion, professional careers, interorganizational linkage, and alliance formation in health care. With Richard Warnecke she evaluated the NCI Head and Neck Cancer Networks projects, resulting in their coauthored book: The Diffusion of Medical Innovation: An Applied Network Approach (Plenum, 1988). She has also served as evaluator for the Northern Appalachian Leadership Initiative on Cancer (1993-95), and worked with the National Research Council Committee on Maintaining Privacy and Security in Health Care Applications of the National Information Infrastructure (For the Record, NAS 1997). She has funding from NIA to examine the linkage between hospitals and nursing homes in rural settings. Using SEER/Medicare matched data, with NCI funding, Dr. Fennell (with Linda Laliberte) studied the impact of living in an area covered by cooperative cancer treatment programs on the extent to which older women with newly-diagnosed breast cancer receive "standard" therapy. She also studied, with AHRQ funding, variation in nursing home quality of care and variation in racial/ethnic disparities in care quality as a function of nursing home structure and care process and of community context. Her current research is on nursing home quality of care differences (with Dr. Vince Mor), cultural competence in nursing home care (with Dr. Melissa Clark), and studies of change over time in professional work, professional labor markets, and professional organizations (with Dr. Kevin Leicht; Professional Work, Blackwell 2001). From 2000-2004, Dr. Fennell served as dean of faculty at Brown University.

Thomas E. Gribbin, MD – Member

Thomas Gribbin graduated from the University of Illinois in Chicago in 1981. After completing residency in Internal Medicine at the University of Illinois Hospitals, he entered fellowship training in hematology and oncology at the University of Michigan, where he held a faculty position from 1988-1998. There he directed a laboratory effort analyzing novel chromosomal translocations in chronic B cell malignancies. He then moved to Grand Rapids, Michigan, to enter private practice with the Cancer and Hematology Centers of Western Michigan, and shortly thereafter became the founding director of the Richard J. Lacks Sr. Cancer Center, Western Michigan's only freestanding cancer hospital. His current interest is in the development of models of care for cancer patients, and issues of survivorship, both for patients and families.

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Mark C. Hornbrook, PhD - Member

Mark Hornbrook, PhD, is chief scientist at Kaiser Permanente's Center for Health Research (TCHR) and is a member of its executive leadership team. Dr. Hornbrook is an expert in healthcare cost and utilization analysis, economic evaluation methods, patient classification methods, health status measurement, predictive modeling, and health-based payment systems. His work focuses on cancer prevention, screening, and treatment, and encompasses standardizing clinical, utilization, cost, and eligibility data across Cancer Research Network health plans; examining the economic burden of cancer and generalized anxiety disorder among adults; improving home healthcare for frail elderly patients and their primary caregivers, and setting care priorities with their families; analyzing the health-related quality of life of colon and rectal cancers survivors; and studying cancer-related end-of-life and palliative care issues. He is deputy director of the Oregon Clinical and Translational Research Institute, one of the first waves of NIH Clinical and Translational Science Awards. He is also principal investigator of the Coordinating Center for the Agency for Healthcare Research and Quality (AHRQ)'s Centers for Research and Education in Therapeutics. Dr. Hornbrook has served on 28 professional committees, including eight as chair, and has served as a consultant to numerous governmental and private organizations, including the Department of Health and Human Services, The Rand Corporation, U.S. Department of Veterans Affairs, the Province of Alberta, the State of Oregon, and the United Kingdom's National Case Mix Office, National Health Service. In addition to his position at TCHR, Dr. Hornbrook is an adjunct professor in Oregon Health & Science University's Population-based Nursing Department and Public Health and Preventive Medicine Department. Dr. Hornbrook was named an Academy Health Fellow in 1996.

Timothy P. Johnson, PhD - Member

Timothy P. Johnson, PhD, is director of the Survey Research Laboratory, professor of Public Administration and Research Professor of Epidemiology/Biostatistics at the University of Illinois at Chicago. Dr. Johnson's main areas of expertise include survey methodology and health behaviors in disadvantaged populations. Within the field of survey methodology, Dr. Johnson's work has focused primarily on sources of measurement and nonresponse error. His measurement error work is concerned with cultural variability in the cognitive processing of survey questions, an area in which much of his work has been invested over the past decade. He has also conducted numerous investigations designed to validate self-reported health information. His work on nonresponse error has been directed at developing new methods for identifying the effects of nonresponse mechanisms on the quality of survey estimates, as well as the development and testing of new approaches to adjusting for nonresponse bias. Dr. Johnson has also invested considerable effort in examining the health behaviors of disadvantaged populations, including homeless persons, immigrants, cultural minorities, criminal justice populations and mental health populations. Some of the health behaviors he has examined among these populations include cancer screening, nutrition, physical activity, tobacco use, alcohol consumption and drug abuse.

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Bryan J. Weiner, PhD – Member

Bryan J. Weiner, PhD, is associate professor, Department of Health Policy and Administration, School of Public Health, University of North Carolina at Chapel Hill. Dr. Weiner serves as director of the Program on Health Care Organization at the Cecil G. Sheps Center for Health Services Research. He is also co-director of the newly established Dissemination Core of the UNC Lineberger Comprehensive Cancer Center at UNC, and director of Health Policy/Dissemination of the NCI-funded Carolina Community Network to Reduce Cancer Disparities. Dr. Weiner's research focuses on the adoption, implementation, and sustainability of innovations in health care organizations. He has studied a wide range of innovations, including quality improvement practices, patient safety practices, clinical information systems, collaborative service delivery models, and evidence-based diabetes practices. Dr. Weiner served as principal investigator for two research studies funded by the NCI Division of Cancer Prevention. The first study assessed the extent to which clinical cooperative groups have integrated cancer prevention and control research into their scientific agendas, structures, and operations, and how cooperative groups have integrated Community Clinical Oncology Programs (CCOPs) into their scientific and policy-making activities. The second study identified organizational and environmental factors associated with high accruals to cancer prevention and control protocols, ways in which CCOPs have adapted to changes in their local health care environments, and the impact of these adaptive strategies on cancer prevention and control accrual performance. Dr. Weiner currently serves as principal investigator on a CDCfunded study examining the reasons why low-income women do not receive radiation therapy following breast-conserving surgery for early-stage breast cancer.

Jane Zapka, ScD – Member

Jane Zapka, ScD, is a professor in biostatistics, bioinformatics and epidemiology at the Medical University of South Carolina, and professor emeritus at the University of Massachusetts Medical School/Worcester. Dr. Zapka has participated in research, service and teaching related to qualitative and quantitative research, program evaluation, quality improvement, managed care, and other health services areas. She has participated in activities related to the continuum of cancer care, including primary prevention interventions, interventions to improve screening prevalence and quality of screening services, patient survivorship and palliative and end-of-life care. Dr. Zapka has collaborated with state and local health departments on tobacco control, breast cancer screening, and colorectal cancer screening, and collaborated on the design of the Massachusetts and South Carolina Cancer Control Plans. She has worked with the regional offices of the American Cancer Society on training, planning and evaluation activities and is currently an evaluation consultant for its Patient Navigation Initiative. Recently, she was project director for the EXCEED initiative (funded by AHRQ) to improve quality of care at the end of life, and is director of the Investigator Development Core for the Resource Center for Minority Aging Research (funded by NIA) involving the role of literacy in self-management of chronic conditions, issues in patient/provider communication, disparities in access to care, coordination of primary and specialty care, the relationship of policy, provider and patient factors related to delayed hospice enrollment, and methodological issues in monitoring process, impact and outcome measures. Training initiatives include those for interdisciplinary teams, medical and nursing student education, and developing systems to enable improved quality of care.