

N²: Building a Network of Safety Net PBRNs

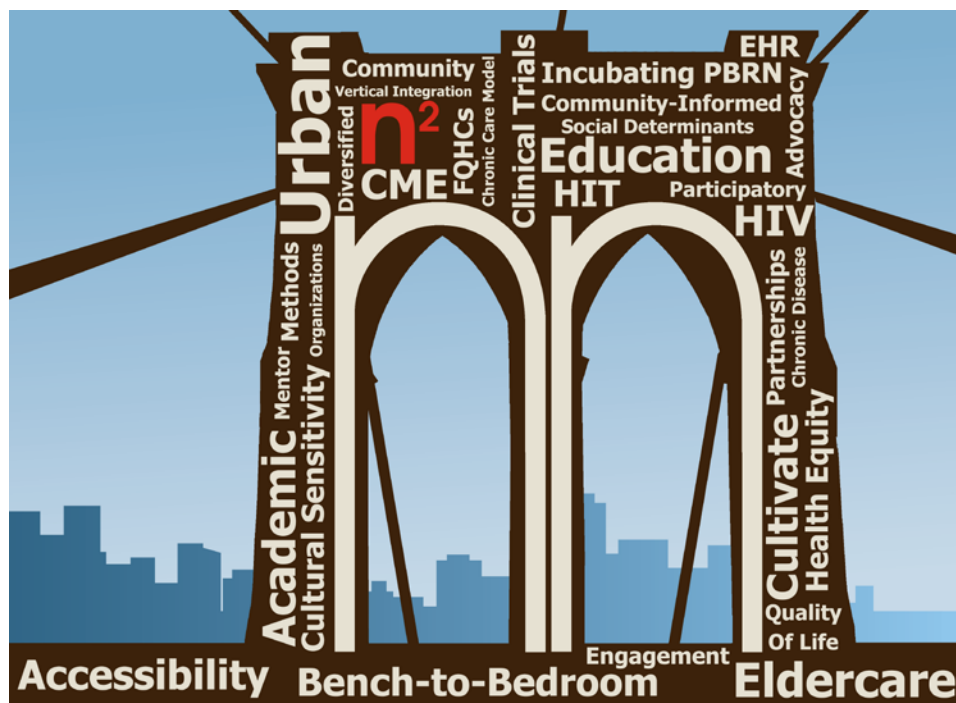
NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

[AHRQ Centers for Primary Care Practice-Based Research and Learning \(P30 Grants\)](#)

The AHRQ Centers for Primary Care Practice-Based Research and Learning nurture partnerships, conduct research, and disseminate knowledge with the ultimate aim of improving patient care. By connecting several Practice-Based Research Networks (PBRNs) and other research partners under a single Center it is possible to engage in sophisticated projects in a collaborative environment.

This summary is an invitation to learn about the Center's research areas of interest, experts, and strategies for enhancing primary care. We hope the information fosters pursuits of shared interest and new quality improvement partnerships, perhaps with you.

N² is a network of safety-net Practice Based Research Networks (PBRNs) established in 2012 by [Clinical Directors Network, Inc.](#) (CDN) that generates and disseminates new knowledge with a focus on medically underserved populations. N² comprises nearly 200 active research-engaged practices, both urban and rural, from member networks of over 600 practices that strive to build a community of learning for primary care practices to improve quality, patient safety, and effectiveness of care by implementing new clinical knowledge into practice. N² is dedicated to developing relationships with the Community Health Centers that serve its target population. Patient Centered Outcomes Research Institute (PCORI)-funded projects such as [Collaborative Care to Reduce Depression and Increase Cancer Screening among Low-Income Urban Women \(PCM3\) \(Grant No. IH 12-11-4522\)](#) and [Enhancing Community Health Center Based Patient Centered Outcomes Research \(EnCoRE\) \(Grant No. NCHR 1000 30-10-10 EA0001\)](#) highlight this focus.



N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Partnerships & Collaborations:

Incubator PBRNs

In addition to facilitating collaborations among its established member PBRNs, the N² infrastructure provides support to two “incubator”—or developing—PBRNs: the [Lutheran Family Health Center Network](#) in Brooklyn, NY, and the Washington DC Metro Research Collaborative. N² is a proactive leader in nurturing centers of research who wish to become a PBRN and existing PBRNs who wish to expand their reach.

“Health center culture values collaboration, and N² extends this strategy by bringing together strong networks to improve engagement and shape research ideas.”

Fred Rachman, MD Alliance of Chicago Community Health Centers, N² Member

In 2013-2014, N² lead PBRN, CDN, hosted an onsite training course for 22 clinical leaders in the Lutheran Family Health Center Network. Participants acquired knowledge in research methodology, stakeholder engagement, integrating patient-reported outcomes, and interventions for conditions such as HIV/Hepatitis C infection. Up to 60 hours of continuing medical education (CME) credits were awarded by the American Academy of Family Physicians. Since the training, Lutheran has developed projects that will be developed into grant proposals.

The collaboration between established and incubator PBRNs is beneficial to both parties, as the incubator PBRNs learn from experience of the established N² network members, while N² values broadening their reach by fostering new partnerships and potential future collaborations.


Community-based Research

N² partners with its member PBRNs to conduct community-based research and learning projects, such as the randomized controlled trial, [Collaborative Care to Reduce Depression and Increase Cancer Screening among Low-Income Urban Women \(PCM3\)](#). PCM3 is a partnership between two N² member PBRNs, CDN and NYCRING, and was funded by PCORI (Grant No. IH-12-11-4522). The study takes place in Bronx County, NY, one of the poorest urban counties in the United States, where cancer stands out as the leading cause of early death, and screening rates remain low due to barriers including access and co-existing conditions, such as depression.

PCM3 compares two evidence-based interventions examining the effectiveness of improving cancer screening and patient-reported outcomes.

- The Prevention Care Management (PCM) intervention focuses on addressing barriers to cancer screening alone.
- The Collaborative Care Intervention (CCI) facilitates decisionmaking and action to engage in cancer screening and reduce depression. In CCI, the care managers serve as a link among patients, primary care clinicians, and mental health care providers. Care managers worked to recruit study participants from six Community Health Centers and two community-based organizations.

For more information on PCM3:

- [Poster presentation](#)
-  [Webinar](#)



N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Training & Education:

Webcast Library

The member networks of N² are dedicated to the continued training and education of primary care clinicians and researchers in the field of practice-based research, and N² provides free onsite and online learning opportunities. The curricula focus on evidence-based practices and methods that demonstrate effectiveness at transforming clinical research into a more clinician- and patient-engaged, cost effective, accelerated research and translation model. Over 750 CME-accredited educational Webcasts are available through the [CDN Webcast library](#). A “Virtual Faculty” of N² PBRN directors and academic partners present the Webinars, sharing their PBRN-related research projects, findings, and models, and provide training in research methodology. These CME Webcasts have been viewed over 65,000 times by participants in the USA and abroad and are rated on average as 98% good to excellent by viewers.



Visit

www.CDNNetwork.org to
access a free, virtual
library of N²-sponsored
educational Webcasts.

Webcast topics include:

- [Engaging Patients to Inform Community Health Research within a Practice-Based Research Network](#), April 2015
- [Using Technology for Patient Engagement: Examples from the Charles B. Wang Community Health Center](#), January 2015
- [Preparing a New Generation of PBRN Leaders: Strategies and Experiences in Training and Mentoring](#), October 2013

Enhancing Community Health Center Based Patient Centered Outcomes Research (EnCoRE)

CDN and the National Association of Community Health Centers (NACHC) have partnered with the Association of Asian Pacific Community Health Organizations (AAPCHO), the Institute for Community Health at Harvard, South Carolina Primary Health Care Association, and Access Community Health Network (ACCESS) to build a learning community focused on Patient Centered Outcomes Research (PCOR). CDN guides day-to-day management, [partnership building](#), and [curriculum development](#) for the training sites while NACHC oversees engagement of partners, including Federally Qualified Health Centers. Using these resources and [PCORI guidelines for community engagement](#), EnCoRE provides a yearlong training curriculum designed to educate and engage Health Center teams including patients and clinical and administrative staff in PCOR.

“EnCoRE will prepare Health Center patients, staff, and researchers in the conduct of community-led patient-centered outcomes research.”

Jonathan N. Tobin, PhD N² PI

Community Health Centers who join the project have specific responsibilities including:

- Committing time for a team of 3-5 clinicians, staff members, and patient representatives to participate in the project and in monthly Webcasts
- Identifying one staff champion to lead the group
- Developing and submitting a “pipeline-to-proposal” grant to PCORI

Webcasts and resources will be open and [widely disseminated](#) and will offer free continuing education credits for physicians (CME), dentists (CDE), nurses (CNE), social workers (CE-SW), and community health educators (CHES).



N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Interventions to Prevent CA-MRSA Infection Recurrence – CAMP-1 and CAMP-2

8 UL1 TR000043 (Administrative Supplement) and PCORI (Grant No. 8UL TR000043)

Community Acquired Methicillin-Resistant *Staphylococcus Aureus* (CAMP-1) Study

07/14/2011-07/08/2013 (Tobin, JN, PI)

[Patient Centered Comparative Effectiveness Research of Home-Based Interventions to Prevent Community Acquired Methicillin-Resistant *Staphylococcus Aureus* and Recurrence \(CAMP-1 and CAMP-2\)](#)

11/01/2014-10/31/2017, PCORI (Tobin, JN, PI; Kost, R, Tomasz, A, Co-PIs)

Skin and soft tissue infections (SSTIs) may be caused by community-acquired methicillin-resistant *Staphylococcus aureus* (CA-MRSA), a bacterium that cannot be eliminated by most antibiotic drugs. These infections may recur because patients come into contact with the same bacteria in the home, which also puts others living in the household at risk. N², led by CDN, has conducted numerous projects related to studying participating communities' needs for education regarding MRSA and a better understanding of how to test models in community-based settings to prevent recurrent infections and household transmission.

Related Information

[The Rockefeller University Newswire Article](#)

“Rockefeller University Hospital shares \$2.8 million contract to study preventing drug-resistant infections in the community”

“This is an innovative, patient-centered project to determine the best method to prevent recurrence of community-acquired MRSA....By focusing on what patients and clinicians identified as their highest priority in combating this disease, we are confident that we are devoting our scientific expertise to the community's major concern.”

[Barry Collier](#), MD Director of the Center for Clinical and Translational Science and physician-in-chief of The Rockefeller University Hospital.

[For more information on projects related to CAMP-1 and CAMP-2](#)



[Discovering the Microbiome of New York City](#)

The initial study, CAMP-1, established an infrastructure for identifying, diagnosing, recruiting, and studying patients with recurrent SSTIs. The study recruited a total of 129 participants with SSTIs from 6 participating Clinical Health Centers. Data were collected regarding participants' demographics, dermatological symptoms, comorbidities, health care utilization, medication adherence, network and environmental exposures, and quality of life, and biological specimens by (wound and surveillance cultures) were obtained and tested by a commercial clinical laboratory (BioReference) and at the Laboratory of Microbiology and Infectious Diseases at The Rockefeller University.

In a related study, CAMP-2, researchers will engage with clinicians and their patients provide educational materials on CA-MRSA, implementing the delivery of a home visit program provided by community health workers/promotoras, and compare standard care with and without the home visiting program. Patients and family members from a Patient Stakeholder Advisory Committee will work alongside clinicians and research staff to refine the home-visit intervention, review decolonization and decontamination approaches, and develop language- and literacy-appropriate patient education materials.



N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Getting to Know N²: Key Personnel

Jonathan N. Tobin, PhD

Principal Investigator, N²

President/CEO, Clinical Directors Network, Inc. (CDN)

"N², our AHRQ-funded Center for Primary Care Practice-Based Research and Learning, allows us to work with our partner Practice Based Research Networks (PBRNs) and other Centers in a collegial way that enhances both professional and business development opportunities for PBRNs. We showcase our partner PBRNs' research through multiple venues, such as CDN's online CME-accredited Webcasts, and at the poster sessions at N² member network NYCRING's annual Convocation of practice's held at Albert Einstein College of Medicine, where we have had the opportunity to have Federally Qualified Health Center clinicians disseminate their research engagement methods to a broader community of clinicians, researchers, and students."

Kenneth H. Mayer, MD

Director, The Fenway Institute

"We value the N² Center for Primary Care Practice-Based Research and Learning as a platform to develop and implement interventions for underserved populations. We recognize that clinician and health center engagement in collaborative community-based research is vital to driving effective high impact HIV/AIDS prevention research and education, and N² has provided an opportunity for us to stimulate the field through initiatives aimed at reducing the number of new HIV infections and developing innovative strategies for reaching vulnerable communities."

M. Diane McKee, MD, MS

Director, New York City Research and Improvement Networking Group (NYCRING)

"Participating in the N² Center for Primary Care Practice-Based Research and Learning has provided the New York City Research and Improvement Networking Group (NYCRING) with opportunities to share work and exchange experience and expertise. We were able to disseminate the methods and results of our Health Resources and Services Administration-funded quality improvement project, [Bronx Ongoing Pediatric Screening in the Medical Home \(BOPS\)](#), and National Institute of Diabetes, Digestive, and Kidney Diseases-funded comparative effectiveness study, [Glycemic Reduction Approaches in Diabetes \(GRADE\)](#), as part of the N² Webcast series. We look forward to continuing to work collaboratively with N² members in the future."

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

What is next for N²?

Expanding to Clinical Data Research Networks

N² will work to expand our productive PBRN-Community Health Center collaborations to the [PCORI funded Clinical Data Research Networks \(CDRNs\) in New York \(NYC-CDRN\) and Chicago \(CAPriCORN\)](#). CDRNs are conceived as entire populations receiving health care within specified health care delivery systems. These populations must be at least one million persons in size. During Phase I and II of the CDRN program, the network must work to capture complete, longitudinal health care data on this population, including electronic health record (EHR) data from both ambulatory and inpatient care in the delivery system, and claims information or other records representing care received outside the delivery system.


N² members including Clinical Directors Network, Inc. (CDN), OCHIN, and the New York City Research and Improvement Networking Group (NYCRING) are already participating in one or more PCORI-funded CDRNs. CDN is participating in the NYC-CDRN and the Chicago-based CDRN entitled CAPriCORN, NYCRING is a member of the NYC-CDRN, and OCHIN is participating in the OCHIN CDRN. PBRNs need to leverage the information and tools developed through the PCORI-funded CDRNs for research, benchmarking, quality improvement and population management for FQHCs. In the future all N² members will be encouraged to participate in a CDRN in order to expand the knowledge base of the N² Center.

For example, the PCORI-funded PCORnet now includes four N² PBRN partners funded in three CDRNs in New York (CDN and NYCRING—NYC-CDRN), Illinois (Alliance and CDN—CAPriCORN), and Oregon (OCHIN-ADVANCE CDRN, and PCORnet builds on the P30 model of a network of networks.

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Get to Know the Members of N²

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
The Association of Asian Pacific Community Health Organizations (AAPCHO) www.aapcho.org			
President: Eugene Welch 925 Clinicians in 29 Health Centers Location: California, National Founded in 1987	AAPCHO is a national association of community health organizations serving Asian Americans, Native Hawaiians, and other Pacific Islanders. We are dedicated to promoting advocacy, collaboration, and leadership that improves the health status and access of these medically underserved communities.	Visit the AAPCHO Web site for a list of available resources , such as:  Practice Transformation Webinar Series	Visit the AAPCHO Web site for a list of initiatives that focus on promoting the Patient-Centered Medical Home model, implementing the Patient Protection and Affordable Care Act, eliminating health disparities, advocating for Health Professional Shortage Areas & Medically Underserved Areas/Populations, and supporting the White House Initiative on Asian Americans and Pacific Islanders.
Access Community Health Network (ACCESS) www.accesscommunityhealth.net			
CEO: Donna Thompson, RN, MS 40 Health Centers Location: Chicago, IL Founded in 1991	The mission of ACCESS is to provide outstanding preventive and primary health care, accessible to all in their own communities. ACCESS provides a continuum of care model that connects patients to health care resources both within and beyond the walls of our 35 Federally-Qualified Health Centers (FQHCs).	Felland, Lechner and Sommers, " Improving Access to Specialty Care for Medicaid Patients: Policy Issues and Options " June 2013. The Commonwealth Fund. Peek ME, Harmon S, Scott S, Eder M, Roberson TS, Tang H, Chin MH. Culturally tailoring patient education and communication skills training to empower African-Americans with diabetes . Translational Behavioral Medicine, 2012;2(3):296-308.	Sustainable Health Center Implementation PrEP Pilot Study (SHIPP) A health services implementation pilot study funded by the CDC conducted with an observational cohort of HIV-uninfected persons receiving daily oral antiretroviral pre-exposure prophylaxis. Northwestern University and Access Community Health Network Medication Education Study (NAMES) . A three-arm cohort study funded by NIH evaluating two primary care-based medication management strategies that leverage EHRs to promote patient understanding, medication reconciliation and adherence, and disease control among hypertensive primary care patients.

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
The Alliance of Chicago Community Health Services (Alliance) www.alliancechicago.org			
CEO: Fred Rachman, MD 650 Clinicians in 200 Health Centers Location: National, including Arizona, Illinois, Texas Founded in 1997	The mission of the Alliance is to leverage our technical and administrative infrastructure to cultivate a community-driven research agenda that is informed by, and benefits the diverse communities we serve. The Alliance's strategic vision is to continue promoting the thoughtful use of Health Information Technology (HIT) in the Safety Net to promote access, improve quality, and efficiency.	Visit the Alliance Web site for a list of publications , including: Zheng K, McGrath D, Hamilton A, Tanner C, White M, Pohl, JM. Assessing organizational readiness for adopting electronic health record systems: A case study in ambulatory practices. <i>Journal of Decision Systems</i> . 2009;18(1):117-40.	Visit the Alliance Web site for a list of research projects . Best Practices for Integrating Clinical Decision Support into Clinical Workflow This project determined the intensity of support that Community Health Centers (CHCs) need to better integrate clinical decision support (CDS) and clinical workflows in order to improve performance on high priority health conditions. For more information on CDS visit the Office of the National Coordinator and review the Webinar hosted by the PBRN Resource Center on Practical Insights on Meeting Objectives of Meaningful Use III .
The Center for Community Health Education, Research, and Services (CCHERS) www.cchers.org			
Executive Director: Elmer R. Freeman, MSW Location: Boston, Massachusetts Founded in 1991	To promote the development of "academic community health centers," that integrate education, research, and service, to influence and change health professions education; improve health care delivery; and promote health systems change to eliminate racial and ethnic disparities in health.	Visit the CCHERS Web site for a list of publications , including: Freeman ER, Brugge D, Bennett-Bradley WM, Levy JI, Carrasco ER. Challenges of conducting community-based participatory research in Boston's neighborhoods to reduce disparities in asthma . <i>Journal of Urban Health</i> , 2006;83(6):1013-21.	Visit the CCHERS Web site for a full list of projects , including: The Integration of Behavioral Health and Primary Care in Community Health Centers - Seeks to examine integration of primary care and behavioral health care and its impact on providing services to Black/ African American patients in community health centers in the Boston area.

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
Clinical Directors Network, Inc. (CDN) www.CDNetwork.org			
President/CEO: Jonathan N. Tobin, PhD 8,412 Clinicians in 250 Health Centers Location: National Founded in 1985	Clinical Directors Network, Inc. (CDN) is a not-for-profit clinician membership organization, practice-based research network (PBRN), and clinician training organization, founded to provide peer-initiated activities for clinicians practicing in low income, minority, and other underserved communities. CDN's overall goal is to translate clinical research into clinical practice for the enhancement of health equity and improvement of public health.	<p>Visit the CDN Web site for a full list of publications, including:</p> <p>Balachandra S, Pardos de la Gandara M, Salvato S, Urban T, Parola C, Khalida C, Kost RG et al. Recurrent Furunculosis Caused by a Community-Acquired Staphylococcus aureus Strain Belonging to the USA300 Clone. <i>Microbial Drug Resistance</i>, 2015;21(2):237-43.</p> <p>Ogedegbe G, Tobin JN, Schwartz JE, Fernandez S, Schwartz JE, Diaz-Gloster M, Cassells A, Khalida C, Pickering TG. Counseling African Americans to Control Hypertension (CAATCH): Cluster Randomized Clinical Trial Main Effects. <i>Circulation</i>, 2014;129:2044-51.</p>	<p>Visit the CDN Web site for a full list of projects, including:</p> <p>Patient-centered CER Study of Home-based Interventions to Prevent CA-MRSA Infection Recurrence (CAMP-2) Aims to reduce the significant patient burden associated with recurrent CA-MRSA infections by engaging Community Health Workers and Promotoras to implement a home-based intervention that provides patients and household members with training and materials for decolonization and household decontamination strategies to patients in Federally Qualified Health Centers (FQHCs) with recurrent CA-MRSA skin and soft tissue infections (SSTIs). (PCORI, Grant No. CER 1402 10800)</p>
Community Health Applied Research Network (CHARN) www.kpchr.org/CHARN/			
PI: MaryAnn McBurnie, PhD Senior investigator at the Kaiser Permanente Center for Health Research Founded in 2010	Community Health Applied Research Network (CHARN) is a practice-based research network of community health centers (CHCs). Established by the Health Resources and Services Administration in 2010, CHARN is a network of 4 community research nodes, each with multiple affiliated CHCs and an academic center.	<p>Laws R, Gillespie S, Puro J, Van Rompaey S, Quach T, Carroll J, Weir RC, Crawford P, Grasso C, Kaleba E, McBurnie MA. The Community Health Applied Research Network (CHARN) Data Warehouse: a Resource for Patient-Centered Outcomes Research and Quality Improvement in Underserved, Safety Net Populations. <i>EGEMS (Wash DC)</i>, 2014;2(3):1097.</p>	<p>Community-based Health Information Technology Tools for Cancer Screening and Health Insurance Promotion</p> <p>This project will test the effectiveness of Community-based HIT Tools for Cancer Screening and Health Insurance Promotion ("CATCH-UP" tools) at improving rates of (1) cancer screening and prevention services, and (2) health insurance coverage.</p>

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
The Fenway Institute www.TheFenwayInstitute.org			
Kenneth H. Mayer, MD Medical Research Director, Co-Chair of The Fenway Institute Health Centers Location: Massachusetts Founded in 1971	The Fenway Institute at Fenway Health works to make life healthier for those who are lesbian, gay, bisexual, and transgender (LGBT), people living with HIV/AIDS, and the larger community. We do this through research and evaluation, education and training, and public health advocacy.	Visit the Fenway Institute Web site for a full list of publications and presentations , including: Cahill S, Valadéz R. Growing Older with HIV/AIDS: New Public Health Challenges . Am J Public Health, 2013;103(3):e7-e15.	Visit the Fenway Institute Web site for a full list of projects , including: Project REACH: Researchers from Fenway Health and Brown University are working together to study the effects of alcohol use on the health of men who have sex with men who are living with HIV.
The New York City Research and Improvement Networking Group (NYCRING) www.einstein.yu.edu/departments/family-social-medicine/nycring/			
Director: M. Diane McKee, MD MS 800 Clinicians in 38 Health Centers Location: New York Founded in 2003	NYCRING is PBRN sponsored by the Albert Einstein College of Medicine Department of Family & Social Medicine and focuses exclusively on the urban underserved. They strive define and strengthen the knowledge base and improve the practice of urban primary care by: 1. Identifying and addressing research and quality improvement questions important to primary care providers, patients, families, and their communities 2. Defining and pursuing a research agenda focused on the specific health, disease, and health services issues of urban underserved patients and communities, and 3. Providing a research resource for undergraduate and graduate medical education in primary and community health.	McKee MD, Kligler B, Fletcher J, Biryukov F, Casalaina W, Anderson B, Blank A. Outcomes of acupuncture for chronic pain in urban primary care . J Am Board Fam Med, 2013;26(6):692-700. Drainoni ML, Litwin AH, Smith BD, Koppelman EA, McKee MD, Christiansen CL, Gifford AL, Weinbaum CM, Southern WN. Effectiveness of a risk screener in identifying hepatitis C virus in a primary care setting . Am J Public Health, 2012;102(11):e115-e121.	Visit the NYCRING Web site for a full list of projects , including: Acupuncture to Decrease Disparities in Outcomes of Pain Treatment (ADDOPT): This study is a repeated measures clinical trial assessing the adoption and implementation of acupuncture as a treatment for chronic pain in an urban primary care setting.

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
OCHIN (formerly Safety Net West PBRN (SNW)) www.ochin.org/services/research/			
Director: Jennifer DeVoe, MD DPhil 3,366 Clinicians in 506 Health Centers Location: National Coverage, based in Oregon Founded in 2007	To improve the health of underserved populations, enhance their quality of care, and inform health policy through research. Transforming health care to improve outcomes and reduce costs demands both innovation and collaboration. It takes individuals and communities working side-by-side to design relevant and reasonably priced information technology and data solutions that can be shared across the health care continuum.	DeVoe J, Angier H, Likumahuwa S, Hall J, Nelson C, Dickerson K, Keller S, Burdick T, Cohen D. Use of qualitative methods and user-centered design to develop customized health information technology tools within federally qualified health centers to keep children insured . <i>J Ambul Care Manage</i> , 2014;37(2):148-54. Note: This publication was part of a larger JACM volume dedicated to PBRN advancement in the use of Health Information Technology . The PBRN Resource Center hosted a Webinar in 2014 that highlighted three projects from the special issue.	Visit the OCHIN Web site for a list of projects , including: Enhancing Clinical Effectiveness Research with Natural Language Processing of EHR (CER-HUB) – The primary goal of this project is to create and evaluate an internet-based Comparative Effectiveness Research Hub (the CER HUB), which will serve as a portal for CER researchers to collaboratively develop applications that code clinical data, allowing uniform processing of data from any EHR implementation.
South Texas Ambulatory Research Network (STARNet) http://iims.uthscsa.edu/STARNet/home			
Director: Walter Calmbach, MD 60 Clinicians in 40 Health Centers Location: Texas Founded in 1992	STARNet is a learning community of primary care clinicians, staff, and patients in offices and Health Centers across South Texas who participate in research to gain knowledge and understanding on how to improve the health of patients and their communities. Projects at STARNet focus on topics such as patient engagement, clinician-patient communication, and health information technology.	Visit the STARNet Web site for a full list of publications , including: Patel NK, Parchman ML. The Chronic Care Model and Exercise Discussions during Primary Care Diabetes Encounters . <i>J Am Board Fam Med</i> , 2011;24:26-31.	Visit the STARNet Web site for a full list of projects , including: ASPirin in Reducing Events in the Elderly: A National Institute on Aging clinical trial to test whether taking aspirin contributes Web site: http://iims.uthscsa.edu/STARNet/projects
Incubator PBRNs – N² proactively works to nurture PBRNs that are new or are looking to partner and expand to help them achieve their fullest potential and support the growing PBRN community.			

N²: Building a Network of Safety Net PBRNs

NURTURING PARTNERSHIPS IN RESEARCH,
TRAINING, DISSEMINATION, AND IMPLEMENTATION

Who, Where, When	How	What	
		Key publication or resource	Recently funded project or initiative
Lutheran Family Health Center Network www.lutheranhealthcare.org			
Director: William Pagano, MD MPH 84 Clinicians in 9 Health Centers Location: Brooklyn, NY Founded in 2012	Lutheran Family Health Center Network is a large Federally Qualified Health Center. Their vision is a comprehensive array of community-based services and supports to provide treatment and care to community residents as close to where they live and work as possible.	Bhatt H, Turkistani A, Sanghani D, Julliard K, Fernaine G. Do Cardiovascular Risk Factors and Coronary SYNTAX Score Predict Contrast Volume Use During Cardiac Catheterization? <i>Angiology</i> , 2015.	Metabolic Outcomes After Sleeve Gastrectomy for Obesity and Diabetes (BMOP) The goal of the BMOP study, a pilot study funded by The Rockefeller University Center for Clinical and Translational Science (CCTS) evaluates the metabolic outcomes resulting from sleeve gastrectomy in light of individual baseline characteristics of obese patients with type 2 diabetes. Web site: www.lutheranhealthcare.org

For more information about N², contact:

Jonathan N. Tobin, PhD
Principal Investigator, N²
JNTobin@CDNetwork.org
(212) 382-0699 ext. 234

Andrea Cassells, MPH
Project Director, N²
acass@CDNetwork.org
(212)-382-0699 ext. 227

For more information about the AHRQ PBRN Resource Center:

Please visit pbrn.ahrq.gov or e-mail PBRN@ahrq.hs.gov

