Event: HRSA PCTE Evaluation TA Webinar 3-27

Date: 3/27/2018

Event Coordinator: Stahl, Anne (HRSA)

Adobe Connect License: Meeting (<100 participants)

Unique Users: 60 unique users

Audio: Universal Voice/ Conference Bridge

Start and End Time: 3:00-4:00 PM EST.

Duration: 60 minutes

URL: https://hrsa.connectsolutions.com/hrsa_pcte_web_page/
Problems Encountered with Adobe Connect Pro

No Problems Encountered

Recording

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<td>Amy Bethge</td>
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<td>Crystal Krabbenhoft, UNM</td>
<td>Maria Portela</td>
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Chat History

maryc: can you post the tooklit URL

Susan Ryherd: How much of an evaluation can be shared while maintaining proprietary control for peer-reviewed publication?

Marie Masotya: Also wondering where to find toolkit resources and recordings of the webinars etc

Susan Ryherd: absolutely, thank you

Anne Patterson: Maryc: The URL for the Evaluation Toolkit is not available yet. When it is available, your HRSA project officer will contact you

Taylor Grimm: Is there a projected release date for the evaluation toolkit and linkedin page?

Ana Marin: Is there a projected date for the website? Is there a way to obtain some of the resources before the LinkedIn goes "live"?

Anne Patterson: Ana Marin: Please contact your project officer for the links to the previous webinars
Polls

N/A
Q&A

Q/A Done Over the Phone
Transcript

Primary Care Training and Enhancement (PCTE) Program Evaluation Technical Assistance (TA) Webinar Series

Webinar #6 Title: Evaluation Technical Assistance Resources
Date: Tuesday, March 27, 2018 at 3:00pm ET – 4:00pm ET

Meeting Details:
- URL: https://hrsa.connectsolutions.com/hrsa_pcte_web_page/
- Conference Number: 800-857-9835
- Participant passcode: 8304877

Moderator: [Recording starts] … Listen only mode during the Q&A portion of the call. You may press star 1 on your touchtone phone if you would like to ask a question. Today's conference is being recorded. If you have any objections, you may disconnect at this time. Now I’ll turn your conference over to Craig Stevens. Thank you. You may begin.

Craig Stevens: Fantastic and thanks so much. Thanks, everyone, for joining. I would like to welcome you to our sixth webinar in a series of six. My name is Craig Stevens from JSI and I am the project director for the HRSA Primary Care Training and Enhancement, or PCTE, evaluation technical assistance contract. The overarching purpose of HRSA’s PCTE program is to strengthen the primary care workforce by supporting enhanced training for future primary care clinicians, teachers, and researchers. The PCTE program focuses on supporting innovative training in three primary ways. One, is to encourage high-quality primary care practice in underserved areas, another is to enhance diversity within the workforce, and, third, to produce clinicians who will practice in and lead transforming healthcare delivery models.

Thank you for joining us today. As I mentioned, this is the sixth in a series of six PCTE evaluation technical assistance webinars. We are very pleased to offer this webinar series designed to provide PCTE awardees with evaluation resources aimed at increasing your capacity to develop and conduct your evaluations. These educational webinars will focus on the application of evaluation topic areas and
Transcript | Webinar 6: Evaluation Technical Assistance Resources

transcript: concepts relevant to PCTE awardees. Today's presentation actually is going to provide you an overview of the work that we've done over the last three years and some of the tools that are going to be made available to you shortly, through HRSA and the PCTE program. But right now, I'm going to turn the webinar over to Amanda and a member of the JSI/JBS evaluation technical assistance team, who will provide details about the webinar logistics.

Amanda Gmyrek: Great, thank you so much Craig and thank you again, everyone, for joining today's webinar. My name is Amanda Gmyrek and I am with JBS International. And as Craig said, I am part of the JSI/JBS evaluation technical assistance team. Before we begin, I have just a couple of housekeeping items to address. First, at the end of today's presentation, we will have a question and answer session. So please hold all questions regarding the presentations until the end. When it’s time for the Q&A, we will have the operator give you instructions on how to ask questions. You can also feel free to type questions in the chat box at any time, and we will read those out at the end. Next, today’s meeting materials will be made available on the HRSA PCTE webpage and we will notify you when they become available.

If you are having any difficulties with technical aspects of the webinar, please use the chat box for assistance. Please type in your question into the chat box and push send. I or our IT support will assist you as soon as possible. And then finally, please note that there is a box on your screen titled ‘Contact Information.’ If you haven’t provided your contact information already, please enter your contact information in this box. Please provide your name, discipline, your organization's name, and your email address. This box will remain open for the next few minutes so please enter this information now. So that is all for housekeeping. I’m going to turn the webinar back over to Craig Stevens who will provide some context on the purpose and goals of this webinar, and then introduce our speakers.

Craig Stevens: Thanks, Amanda. And so, as I mentioned, this is really a recap and a little bit of a preview into the tools and resources that we have been developing that are going to be available to you, versus actually setting up a webpage under which all of these
resources will be available, and this won’t be the last time that you will be hearing about these. But really, this is our opportunity to give you a little bit of insight into what will be coming. So, the JSI/JBS team has had a three-year evaluation TA contract with the PCTE program. In the beginning of the program, the focused deliverables were first a white paper and literature review, so with this we took a look at what the evidence was out there regarding access, quality, and cost in health professional training and education programs. And as you can imagine, there is various -- a good amount of evidence out there. But we’re hoping that PCTE awardees are going to continue to add to the body of knowledge. In particular, we were taking a look at evaluating health professional trainee disposition in primary care with underserved settings or populations.

We also, to add to the white paper and literature paper review conducted a number of site visits with PCTE awardees getting to understand the context under which folks work and their evaluation approaches, providing some on-site TA, and understanding the challenges and assets that folks had, really enabled us to develop and understand training and TA needs.

Ultimately [what] we presented to HRSA after a year of our background research was a technical assistance plan that encompassed a number of deliverables, and I’m mentioning a few here and we’ll review these in the webinar. We developed a toolkit for evaluation for the program. We also developed awardee profiles for, particularly the 2016 – and this is really a proof-in-concept in terms of being able to disseminate information regarding awardees and share it between awardees -- a direct finding of some of our site visits and the desire to understand what was happening with other awardees within the program. We also provided direct evaluation TA to the 2016 awardees; those were through conference calls with the PI and the evaluation team. We have coordinated delivery of six – this is number six -- evaluation TA webinars. We also developed a HRSA health workforce training program evaluation tool tip sheet that will also be available on the website and created a project officer guide for monitoring grantee evaluation efforts. Finally,
later in our presentation, we’ll talk about the development of the HRSA PCTE LinkedIn group page plan.

So, first I would like to introduce our guest speakers today. We have Amanda Gmyrek from JBS International, myself, Craig Stevens, and a second speaker from JBS International, Lauren Eckert. Dr. Gmyrek is a licensed clinical psychologist with twelve years of experience focused on directing delivery of TA to federally-funded grantees across different behavioral-health related grant portfolios, as well as directing, implementing, and managing cross-site evaluations of federally funded behavioral health programs. Dr. Gmyrek is a Principal and Senior Researcher at JBS International. I, Craig Stevens, have 20 years of experience working in the healthcare and public health environment with a long-standing history of working with consumers, providers, and health and social service organizations. I have been with JSI since the inception of the Vermont-based office in 2004 and have worked extensively convening and facilitating healthcare industry and consumer stakeholder groups. I bring expertise in planning, evaluation, policy development, and healthcare infrastructure and systems development. But prior to working with JSI, I held concurrent positions as Associate Director of the University of Vermont College of Medicine Area Health Education Center Program, which as you very well know is a workforce development program, and Director of the Office of Primary Care for UVM. Finally, Ms. Eckert is a sociologist and public health researcher with 11 years of experience in data analysis and management, survey research, and performing evaluations of substance use treatment programs, primarily medical care organizations, HIV testing programs, and emergency care centers. Ms. Eckert is a Research Analyst at JBS International. Now I will turn this back over to Amanda.

Amanda Gmyrek: Great. Thanks so much, Craig. And so, I’m going to talk just a little bit about the evaluation TA webinars that Craig mentioned earlier. So, as Craig said, this is our sixth of six evaluation TA webinars. We’ve been delivering the webinars since January 2017. And our approach to evaluation TA activities, including these webinars, was consistent across the webinars and was guided by the educational
content that HRSA prioritized for delivery to PCTE awardees. The webinars focused on topics significant to PCTE evaluation activities, and speakers included past and present PCTE awardees, as well as national experts. Each speaker provided direct, applied, and comprehensive perspectives on PCTE evaluation activities. The list of webinars, including today’s, is provided here in this slide. So, for each webinar we have compiled all of the resources related to each webinar, and that includes the agendas for each webinar, PowerPoint presentations – and, in most cases, there were presentations from different presenters, so each of the presentations from each of the webinars – and any supplemental materials that were provided for the webinars such as journal articles and other resource materials. We will also be making transcripts available, as well as the link to the Adobe Connect recording of each webinar, which includes closed captioning. And all of these materials will be available on the HRSA PCTE webpage. I am actually going to turn it back over now to Craig to discuss the awardee profiles and searchable profile spreadsheets.

Craig Stevens: Thanks again. So again, we developed this proof-of-concept that we would be able to share information among awardees, particularly on a webpage platform and we did this with the 2016 awardees in particular. So, we have developed these profiles that have a number of key pieces of information that provide an at-a-glance overview of the awardees. They provide insight regarding the peer awardee work and also provide an opportunity for self-directed exploration of awardee programming and evaluation. So much of this work is driven by HRSA and they’ve recognized that there is a lot of expertise and desire for awardees to connect and to share information and HRSA sees this as an opportunity to advance the work of PCTE and share information among awardees.

Along those lines, it also is helping to move forward HRSA’s vision of moving towards the development of community practice among the PCTE awardees and, in order to facilitate this, what we did is we developed an Excel spreadsheet. It’s a searchable spreadsheet that will be posted on the website and it includes some key elements of each project. At this point, we’ve categorized each of the 2016
Awardees by the HRSA priority outcomes. So, you’ll be able to go into the Excel spreadsheet and look at a number of different indicators, such as which awardees are focusing on cost of care provided by trainees and faculty, quality of care, and rates of graduation and program completers practicing in underserved areas at least one year after program completion. So, there’s some really key data that’s present in here that we haven’t listed in this webinar. In addition to listing it by organization, we are also making available the principal investigator and their contact information and a listing of the partners. As you can imagine, we have a broad diversity of partners that are working with awardees, some federally qualified health centers, private practice, specialty centers, and making that information available so, again, as folks are looking for examples of work that’s being done, it’s present in these profiles.

In terms of the project overview, the profiles also provide some insight into the trainee groups and the disciplines targeted, so certainly folks who are working in the medical professions -- we list whether they are working with residents in primary care, faculty, advanced degree students such as physician assistants, nurse practitioners, bachelor’s degree students such as nursing or other allied health professionals. And then finally, we do provide some insight into the primary project objectives. While there’s great diversity in each of the awardees, we have to be able to capture the primary project objectives with which they’re being engaged for their particular award. Finally, we also list the measures and tools that are being utilized or at least proposed by each awardee. So again, this provides some really good insight into not only what is being measured, but also the potential tools that could be adapted or used and gleaned by other PCTE awardees.

The next piece that I’d like to talk about is the evaluation toolkit. So, the purpose here was to actually develop something that was able to be used by awardees in each phase of their evaluation. Whether or not it is during the RFP proposal process, so that individuals that are proposing to develop a PCTE program have good insight into what the expectations are and how to craft an evaluation to meet those
expectations. But also, to existing awardees, regardless of whether or not they’re in the implementation or evaluation or replication phase. The evaluation toolkit focuses on the three-part aim plus provider well-being – so access, quality, cost, plus provider well-being. It is meant for both the health workforce planning team and the evaluation team. Again, as I mentioned, this is for organizations that are looking to apply for an award, as well – and develop their proposal – as well as those that are looking to refine their evaluation approach. There are seven modules that will be made available on the website. Each module will be able to be accessed individually or as one document. So, we do want to have the flexibility that if folks know what area of evaluation they would like to focus on, that they’re able to select that particular module or download the entire document. So, I am going to go over, briefly, the seven modules and the content that is contained therein.

Module 1 really focuses on engaging stakeholders and helps identify those interested in the program operations, those that are served or affected by the programs, and those that might make decisions based on the evaluation findings. Really the key here is to make sure that before you begin the evaluation that you are obtaining the appropriate buy-in from stakeholders so that when the evaluation results come out, that you are able to leverage them to the greatest of your use. Module 2 focuses on describing the program. So, it primarily focuses on helping you develop the communication soundbites throughout the program. What is the consistent message in terms of what you’re trying to accomplish? And this is done through development of SMART objectives as well as the development of a logic model. Many of these modules contain both prompting questions to try to focus your work and be efficient in terms of the use of the toolkit, as well as provide some forms that you can fill out and examples from existing programs. So, this is a little bit blurry, but we were able to obtain permission from the University of South Alabama. They did an excellent job on their logic model and this is just a portion of it. And it gives you the idea of the type of format that we’ve made available that you can fill in as part of development of your logic model and also, as I mentioned, it provides an excellent example real-time of the type of logic model that really helps
focus some of the awardees work. And our thanks to the University of South Alabama if they are participating today.

Module 3 focused on the evaluation design, really helps to determine what matters at each stage. So, we do understand that you are going to need evaluation support at different phases of your program, whether you’re in the planning, the implementation, or maintenance -- I am sorry -- in the program evaluation. So, this helps to walk you through each of these components and asks specific questions to help, again, focus. The idea here is that – or the idea overall is that we’re really trying to help awardees determine an evaluation program that provides the most utility versus the most volume of work. So again, focus is a key word that we use throughout this toolkit. Module 4 helps to discuss the gathering of credible evidence, assuring that evidence -- that data is measurable, reliable, adequately accessible, and talks about different mixed methods approaches such as the use of qualitative and quantitative data and their role in your evaluation approach. Module 5 focusing on data interpretation and, again, we mentioned that stakeholders bring -- stakeholders, when they are involved, bring validity to your program and so it’s going to be important to be able to communicate to them your data interpretation -- the data limitations, the context, whether or not you are using comparisons such as other literature or benchmarks, whether the results are your actual versus intended, and any biases that you might be able to communicate through the data interpretation.

So, this is a snippet from one of the toolkits and, again, my apologies if it is small on your screen. This particular one provides some really good insights to postgraduate surveys. One of the challenges that we saw during our site visits was that those long-term outcomes are really difficult, and we wanted to provide some guidance for elements that are feasible. So, this takes a look at some sample questions that might be posed to program completers that give insights regarding the outcomes. So, for example, “Is the practice in which you work PCMH certified?” It gives you some ideas of whether or not individuals post-program completion are operating in
an environment that promotes quality. “Do you lead any quality improvement efforts in your organization?” Those leadership skills and the comfort level that they may have in leading quality improvement again, provides some insight into outcomes in the vein of quality. So, a lot of these examples, when you are struggling with what to measure -- what are the interests of HRSA? What’s feasible and manageable? We’ve really tried to, again, use that word focus to use the best of the resources that are available to you and, yet, provide some important insights.

Module 6 focuses on the use and sharing lessons. This is really the communication of results when you’re looking at the end of your evaluation program. So, asking questions about the uses of program evaluation data and how you want them to use them -- are they for performance and outcomes? Are they to be comparing outcomes to previous years? Supporting realistic goal forming for the future? Looking ahead? And supporting program planning in the future as well. We do understand there’s many masters that you have in terms of who you’re accountable to, and we do want to ask questions about how you’re applying this. So, is this data, and the communication of data, being used to better engage faculty in the program, justify the use of resources to administration, or increasing the resources, engaging and expanding clinical preceptors insights? Certainly, replicating the programs that you are doing to other sites and/or spreading it throughout your organization? Leveraging additional grant or research opportunities? Leveraging your findings so that you can pursue additional resources? As well as incorporating the education of students on data use.

And then, finally, the evaluation toolkit includes a seventh module which really captured some special topics. A number of organizations are working on interdisciplinary training, integrated behavioral health, social determinants, population health, and we wanted to provide some insights into these special topics. And they’re not necessarily part of the evaluation rubric that we’ve set forth, but we did realize that these are important to address because so very many awardees have this essential to their programs. So, we’ve put forth in the toolkit
some examples of training tools, example measures, evaluation questions, objectives that are relevant to these special topics. And I have a couple of examples here. So, when you pull up a section of this particular module, you'll see that there are some suggested training tools that are available publicly, and then some evaluation tools. So again, if folks are struggling with, or questioning, what to do in terms of evaluating any of these special areas of interest, there are sample evaluation questions, measures, and tools that are available that, hopefully, will not only help you focus but also, again, use your evaluation resources to their fullest ability. So now I'm going to turn this over to Lauren who is going to discuss the LinkedIn group page.

Lauren Eckert: Great. Thanks so much, Craig. So, as Craig mentioned earlier on the call my name's Lauren Eckert and I'm a Research Analyst at JBS International and I work as part of the JBS/JSI team. So, I'm going to talk a little bit just about the LinkedIn group page, where we are, what it's going to be used for, why we even bothered creating one, and sort of the next steps looking forward. So, the LinkedIn group page – so, first, what is really LinkedIn? Some of you may be more familiar than others. Some of you may have heard of it, some of you may be actively engaged, but essentially LinkedIn is a social network for professionals that allows you to connect with others in your field. So, we have other social networks like Facebook or Twitter and those are really just sort of not really focused around your career and moving forward in your job area. So, LinkedIn is really focused around that.

So why create this LinkedIn group page for the PCTE program? We have four different sort-of reasons that we have really delved into, why this group page be useful for awardees and for HRSA? The first reason is that it will allow grantees to discuss relevant questions and topics among themselves throughout and beyond the grant period. And this is really the core of the LinkedIn group page, is that even beyond the grant period, PCTE grantees can be a part of this group page and continue to have ongoing discussions about what you’re doing, about your
challenges and successes, so that is really -- that was really the core of the LinkedIn group page that we have created.

The second through fourth reasons here, you’ll see on the left that it says, “During the grant period,” and so during the grant period, the idea is to have HRSA staff really be available to PCTE grantees in a different way than maybe they have before. So, HRSA staff is going to be on the LinkedIn group page as well, available to answer awardee questions, provide support, and suggest resources that may assist awardees. HRSA is also going to use that LinkedIn page to provide updates and information to awardees and also to deliver resources, things like the webinars, the toolkits – we’ll be able to provide links on the LinkedIn page itself.

So, how will the LinkedIn page be used? We’re going to have HRSA staff – the subject matter experts and content experts – they are going to be group managers. These group managers ideally are going to really initiate and moderate discussion sessions on topics that are relevant to you all – to the PCTE awardees. These are just some example topics that we’ve thought of so far and, clearly, we really -- and HRSA really -- wants to be able to discuss topics that are relevant to you. So, these are just topics that we’ve thought of so far – evaluating interprofessional education, for instance, cultural competence as a measure of access, and so on and so forth. You’ll have the opportunity to share your experiences as awardees regarding the topic, so, for a certain week, say the topic is utilizing rapid cycle quality improvement. Essentially, we are going to ask you, as awardees, what your experience has been with that. What have been the things that you have tried? What works? What hasn’t worked? And so, not only will you be able to share that with others, but you’ll be able to hear from other awardees about what’s been successful, or not so successful, from them. And also, to receive up-to-date information on what the literature has found from HRSA staff. So, HRSA staff is going to sort of summarize what everyone -- what all of the awardees have stated, and then also, you know, give you a brief little blurb on what the current literature and what the current research says.
So, what are the next steps for the LinkedIn page? Well the page itself is currently being finalized by the HRSA staff, so it is not live yet, but you will be notified when it goes live. All PD’s and evaluators will initially receive an email invitation to join the LinkedIn group. The group managers that manage the page will ask the PDs for the names of any staff, any PCTE awardees staff who they would like to have invited to join the group. And then those staff will be sent invitations to join as well. However, it is a public group which means that any individual can join the group at any time. You know, there may be people who used to work at a PCTE awardee site and still want to keep up-to-date with what’s going on, and those people can join as well.

So, what are the next steps? If you don’t have a LinkedIn profile, that’s okay. It’s very easy to create one. It just includes your name, a picture, a really brief description of your professional career, things such as your current job and your past job, and your professional interests. If you already have a LinkedIn profile, you will use that same profile that you already have -- that you use for your own professional connections. You will use that same profile to be a member of this group so there is not a different profile that you need to create to be a part of the LinkedIn group – the LinkedIn PCTE group that we’ve created here. I do have a note at the bottom that organizations cannot be members of the LinkedIn group. So, there is a chance that some of your organizations may have LinkedIn pages of their own. That’s great but unfortunately there is not a way for a page itself to be a member of the group -- only individuals. So, anybody who wants to be a member will have to create their own LinkedIn profile and then join the group individually. And I’m going to go ahead and pass it back over to the moderator of the call to go ahead and start the Q&A session.

Moderator: If you would like to ask a question on the phone lines, please press star 1 and record your name at the prompt. Again, to ask a question, please press star 1, please be sure that your line is unmuted, and record your name when prompted.
Craig Stevens: This is Craig again. As folks are queuing up any questions – and please interrupt me if someone comes forth with a question – I just want to provide a little bit of information in terms of kind of next steps and how this kind of will be coming together. So, we actually just met with the HRSA team yesterday and provided an overview of each of the products, their status, and then overview of some of the content for folks that may not have seen it before. We’ve packaged all of that information. We do have a couple of minor revisions to make and adaptations, but we’ve packaged all of that information and we’ve developed an outline for a webpage which will be dedicated to these tools and resources. The content and that webpage outline has already gone to HRSA’s Department of Communications – I think it’s actually DEA, so I’m going to – I forget what the acronym stands for, but it’s moved through that -- it is moving through the process so that the webpage developers will actually be able to enable it. I think Lauren might have mentioned the LinkedIn, because this is also a proof-of-concept, is going through an internal review because this is a potential tool that could be spread to other programs. And so, I think that we’re in a good position to be able to have those enabled on the website in the near future.

Having said that, if you do have some questions, your program officials, your PO’s are excellent content folks. They’re also key contacts in terms of being able to access any of the information that you may have. We’ll make sure that each of the PO’s have a zipped file all of the content. We did provide an orientation to it. And if you have questions or you’d like to start accessing some of the resources, they might be able to guide you to what’s available right now. So, for example, if there’s a profile, we are interested in who might be working on any of the desired outcomes -- they might be able to direct you to that profile which contains the contact information of the principal investigator with whom you can follow through. Or, if you are interested in any of the example logic models of which we showed a screenshot of Alabama, and you want to see some real-life application of the evaluation toolkit that your peers have been working on, those things may be available. So, until the website is enabled, or the webpage is enabled, certainly turn
to HRSA, turn to your PO's for any assistance or to be able to help navigate, perhaps, the content that’s going to be enabled on the webpage.

[ Pause ]

Amanda Gmyrek: Thanks, Craig. Did we have any calls from the operator or any questions from the operator?

Moderator: No, there are no participants in the queue.

Amanda Gmyrek: Okay. Craig, we did receive one question in the chat that is, “How much of an evaluation can be shared while maintaining proprietary control for peer review publication?” I do not know if you have thoughts on that for our audience members.

Craig Stevens: I don’t, and that’s really an interesting question. I think one of the things that we are recognizing with the PCTE work is -- I guess the short answer is there’s going to have to be a balance between what you’re valuing in terms of this is proprietary versus what’s the added value for sharing it with some of your peers and with HRSA. We recognize that some of this work is really going to be providing insights. Some of the long-term outcomes, particularly when you’re looking at tracking program completers – even if you’re looking at asking them that one question, for example, of “Are they participating in quality improvement in that practice in which they are now employed?” It is difficult to track individuals, and there’s a lot of resources that would be needed to be doing that to the extent of it’s a research-based or something that you would be able to put before a peer review journal.

Part of me from a selfish perspective of wanting to see this advance is, the more that you can share, the more that the bar is being raised for folks and the more insights that you can share, the more that folks are going to be able to either provide their experience and direction or be able to leverage the insights that you have for further work. So, I don’t really have an answer, you know, but, again, the concept of what we are trying to do here is to connect folks in a way -- in ways that raises the bar, that advances the body of knowledge in this area as much as
possible. I think we can loop back and see if we have any insight to the specific question, but I guess that would be my advice in terms of the purpose of all of this work versus perhaps some of the proprietary interest that you might have for particular research.

And certainly, since we have a number of folks on the telephone from other academic institutions, if anyone has any insights to that, we can certainly – you know, raise your hand or pose an answer and please share. I mean, that’s been the purpose of a lot of this work is to connect PCTE awardees with each other to be able to have these types of discussions.

[ Pause ]

Amanda Gmyrek: Great. Thanks, Craig. We had a few other questions and comments about the resources and materials. And again, those will become available. Your HRSA project officers will contact you when those remain available.

[ Pause ]

Amanda Gmyrek: I think that we may have a few – oh, here is another question. Is there a projected release date for the evaluation toolkit and LinkedIn page?

Craig Stevens: Good question for which I don’t have an answer to. I think in terms of overall rollout, to be realistic, the webpage will be made available sooner. Again, the LinkedIn concept is new, and it is really something that HRSA is looking at very closely, so that when this is released, that they’re really prepared for other programs to be able to use this model. So, the best that I can provide and I’m going to guess that my colleagues at HRSA will say this as well, is that the webpage will be released first, which will have the profiles, the toolkit, the webinars with associated materials. We also have a list of additional external resources including some of the clearinghouses that are available and some tip sheets. So that will be made available first and the LinkedIn will most likely come second, after it’s gone through a more
judicious internal review. I do not know if anybody has any additional insights to or anything to add from the HRSA team.

[ Pause ]

Craig Stevens: All right, well. Any other questions? I’m not a proponent for keeping us. We are still available; our contract goes through the middle of April. But you have incredible resources in the HRSA team, and so we will make ourselves available as much as is needed between now and the end of the contract to either yourselves or to the HRSA team and, otherwise, I think that we can conclude today’s meeting.

Amanda Gmyrek: Great. Thank you, Craig. Take care, everyone.

Craig Stevens: Thank you so much, everyone. Take care.

Moderator: Thank you for joining today’s conference. This concludes the call. You may disconnect your lines at this time.

[ Event Concluded ]