

UCSF PRISE Center Annual Report

October 2020 – September 2021

We advance the use of implementation science
methods to improve health and health equity

<https://prise.ucsf.edu>



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Message From the Co-Directors



Margaret Handley, PhD, MPH



Adithya Cattamanchi, MD, MAS

Launching a new Center during the pandemic has meant innovating and improvising on many fronts. Yet, this year has only enriched our commitment to carry out the vision and mission of the PRISE Center. Our team has practiced what we promote as our implementation science aspiration to apply implementation science methods to meet the challenges of inequitable health and health care.

From our early engagement with the San Francisco Department of Public Health (“do something about COVID!”) to the longer collaborative planning processes which our faculty have led, we are now working on an impressive range of projects across clinical, public health and community partnerships. We feel humbled at how much more there is to do, but are excited by the momentum generated despite the pandemic and are looking forward to what lies ahead.

Sincerely,

Margaret and Adithya, PRISE Center Co-Directors

PRISE Center Overview

In October 2020, UCSF launched the PRISE Center – short for Partnerships for Research in Implementation Science for Equity – to help reduce health disparities in San Francisco and beyond. The PRISE Center functions as a hub that aligns both applied research and training to promote the use of cutting-edge methods within delivery systems, and community partnerships to address implementation problems focused on health equity. The Center is a joint initiative of the Department of Epidemiology and Biostatistics and the Department of Medicine at Zuckerberg San Francisco General (ZSFG), with additional seed funding from Helen Diller Family Comprehensive Cancer Center and School of Medicine Dean's Office for Population Health and Health Equity.



Partnerships

We form strong partnerships with clinicians, public health practitioners and other implementing partners at the local, national and international level to identify and address implementation challenges



Research

In collaboration with implementation partners, we conduct innovative implementation science research to improve health and health equity



Education & Training

We develop opportunities for training in implementation science and health equity

PRISE Center Faculty and Staff



Dr. Elaine Khoong
PRISE Faculty



Dr. Christina Mangurian
PRISE Faculty



Dr. Janet Myers
PRISE Faculty



Dr. Oanh Nguyen
PRISE Faculty



Dr. Neeta Thakur
PRISE Faculty



Dr. Priya Shete
PRISE Faculty



Dr. Maria Garcia
PRISE Faculty



Dr. Emilia De Marchis
PRISE Faculty



Dr. Matthew Spinelli
PRISE Faculty



Dr. Jennifer Vellozo
New PRISE Faculty
Joining March 2022



Leah Murphy
Program Manager



Stuart Gaffney
Program Coordinator

PRISE Center Year One Accomplishments and Partners

Year One Milestones	Year One Accomplishments
Recruit and engage PRISE faculty and staff	Recruited 5 faculty program leads, 4 additional faculty and 2 staff members, including a full-time program manager and a part-time program coordinator.
Identify key stakeholders and partners for embedded implementation research collaborations	PRISE faculty conducted landscape analyses and scheduled regular meetings with SFDPH leadership to explore implementation challenges and identify potential implementation research collaborations in the areas of behavioral health, hospital care, primary care, sub-specialty care and population health.
Develop framework for PRISE Center grants and apply for grants	Developed grant framework delineating PRISE Led, PRISE Supported and PRISE Affiliated grants. PRISE faculty applied for 11 grants, with 6 funded and 1 receiving a favorable review (see page 8).
Conduct implementation science research focused on health equity	Between October 2020 – September 2021, PRISE faculty launched 4 new projects and published 50 papers applying implementation science research methods to address health disparities (see page 10).

PRISE Center Partners



San Francisco Street Crisis Response Team Evaluation



Image: Street Crisis Response Team photo reprinted with permission from SFDPH

In November 2020, the San Francisco Department of Public Health (SFDPH), the San Francisco Fire Department, HealthRIGHT 360, and RAMS, Inc. launched a pilot program called Street Crisis Response Team (SCRT) to respond to behavioral health crises in public spaces. Instead of a police response – the norm in most communities – mobile teams comprised of a community paramedic, a behavioral health clinician and a peer specialist provide rapid, trauma-informed response to behavioral health crises. SCRT de-escalates these crises in the community, addresses immediate health care and mental health needs, and provides linkage to social services, such as mental health and substance use treatment and housing.

SFDPH received a Robert Wood Johnson Foundation grant to complete a rigorous evaluation of SCRT. Dr. Janet Myers, PRISE Center Program Director for Population Health, is providing implementation science methods consultation to the team and is collaborating closely with researchers based at SFDPH, including the principal investigator, Dr. Matthew Goldman. The goal of the mixed-methods study – utilizing an interrupted time series design and qualitative interviews with recipients of SCRT services – is to evaluate the impact of SCRT on post-crisis episode outcomes including accessing routine care, reutilization of crisis services, assessment for housing placement and jail entry. The research team has received IRB approval, engaged community partners including those with lived experience to inform the research process, developed data infrastructure to support the quantitative analyses, and is beginning to recruit a representative sample of clients for interviews.

Building Capacity for Research to Address Climate Impacted Health Conditions

Extreme heat and wildfire smoke events are increasing in California and worldwide in part due to human-generated climate change. The health effects of these events include mental health impacts, increased cardiovascular and respiratory diseases, injuries, and premature deaths. The communities that bear the heaviest health burden are the ones most exposed and least likely to have the economic, social, or political resources needed to respond. Building on years of work to increase local resilience to respond to climate change, SFDPH and the San Francisco Office of Resilience and Capitol Planning recently launched the Heat and Air Quality Resilience Project (HAQR) to bring together numerous municipal departments and community organizations involved in climate resilience planning, including emergency preparedness and response partners, housing and homelessness support services, and green infrastructure. However, to date, there have been limited efforts to engage community members in climate resilience planning.

To address this gap, Dr. Neeta Thakur, PRISE Center Program Director for Sub-specialty Care, partnered with HAQR leadership and community-based organizations to submit a Patient Centered Outcomes Research Institute (PCORI) grant. The grant focuses on engaging community stakeholders from San Francisco neighborhoods disproportionately impacted by extreme heat and poor air quality to identify and prioritize acceptable interventions to mitigate negative health impacts. This is the first PCORI grant awarded to engage communities in research focused on climate impacted health conditions.

Data Literacy in Bay Area ESL Classrooms



Image: Word cloud of how participants found stress relief and social support

In July 2021, Dr. Margaret Handley, PRISE Center Co-Director, and partners from San Francisco State University and Mujeres Unidas y Activas were awarded a grant from the Patrick J. McGovern Foundation focused on integrating COVID-19 data literacy and data visualization bilingual education into English as a second language (ESL) classrooms in San Francisco and the Bay Area. The grant will expand a pilot launched during the pandemic with a University of California Office of the President (UCOP) grant.

The additional funding will enable Dr. Handley and collaborators Dr. Maricel Santos and Maria Jose Bastías to engage women from indigenous backgrounds who may require more intensive support with data and digital learning spaces. The grant will also support development of a first-of-its-kind Communicative Justice Leadership Program that 1) combines language instruction with data literacy skill-building, public speaking, and health coaching; 2) develops a web-based toolkit of data visualization teaching resources for use in community-based programs serving linguistically minorized leaders; and 3) establishes a Bay Area Task Force committed to scale-up and integrate with community health worker programs.

The Patrick J. McGovern Foundation grant builds on over twelve years of work by Dr. Handley and colleagues collaborating with ESL teaching partners throughout California to develop and refine a model to engage adult ESL learners as “expert interpreters” in the process of translating health research and health messages into information that their own communities can understand.

During the COVID-19 pandemic the San Francisco Department of Public Health (SFDPH), in collaboration with community-based organizations (CBOs) and neighborhood coalitions, developed and implemented a robust package of COVID-19 prevention and response strategies including contact tracing and case investigation, isolation and quarantine, a vaccine call center, and community vaccine sites. Even though vaccine coverage is relatively high among Asian, Latinx, American Indian and Pacific Islander populations in San Francisco, disparities remain in the percentage of COVID-19 cases, hospitalizations, and deaths by race and ethnicity.

In June 2021, SFDPH received a grant from the Centers for Disease Control and Prevention to expand COVID-19 response programs to better serve the needs of communities disproportionately impacted by COVID-19. SFDPH and grant partners (CBOs and UCSF) are focused on integrating community health worker programs into the scheme of COVID-19 services, improving data collection and reporting, and formalizing neighborhood coalitions focused on health equity in neighborhoods disproportionately impacted by COVID-19. PRISE Center faculty will support evaluation efforts, including utilizing implementation science-based methods to identify barriers and facilitators to integrate community health worker programs into COVID-19 services to improve health outcomes for vulnerable communities.

PRISE Center Grants

Between October 2020 and September 2021, PRISE Center faculty applied for 6 grants as the prime recipient and 5 grants as a sub-awardee, for a total of 11 grants. Of these, 6 were funded and 1 received a fundable score (confirmation of funding status pending). Grants submitted by PRISE Center faculty in year one are summarized below.

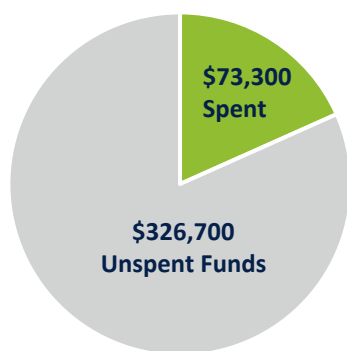
Proposal Title	Funder	Partners	Type of Award	Status
COVID-19 Health Equity Grant	CDC	SFDPH; CBOs	Subaward	Funded
ESL Data Literacy Grants	Patrick J McGovern Foundation UCOP	Mujeres Unidas y Activas; SF State	Foundation Gift Grant	Funded
SF Street Crisis Response Team Evaluation	RWJF	SFDPH	Subaward	Funded
Identifying barriers to prevent COVID-19: SF contract tracing program	UCSF/DEB Research Advancement Fund	SFDPH	Grant	Funded
Building Capacity for Research: Climate Impacted Health Conditions	PCORI	SFDPH; SF Office of Resilience & Capital Planning (ORCP)	Grant	Funded
Rehabilitation in Safety Net Environments for Patients with COPD	NIH R01	N/A	Grant	Received fundable score
Building Resilience Against Climate Change	CDC	SFDPH; ORCP; Heat & Air Quality Resilience Project	Subaward	Submitted
Maternal Community Health Workers to Promote Healing and Trauma-Informed Care	Center to Advance Trauma-Informed Health Care	ZSFGH; SFDPH; CBOs	Grant	Submitted
A Regional Approach to Same-Day PrEP Among Vulnerable Populations in the Bay Area	NIH R01	SFDPH	Subaward	Submitted
COVID-19 Community Health Worker Network Grant	CDC	SFDPH; CBOs	Subaward	Not Funded

PRISE Center Consultations and Presentations

Between October 2020 and September 2021, PRISE faculty gave 10 presentations on the PRISE Center to UCSF Departments, Divisions, Centers and external partners. PRISE Center faculty provided 20 consultations on incorporating implementation science methods into research proposals.

PRISE Center Year One Budget Summary

PRISE Center Year 1 Seed Funding Budget Summary



The PRISE Center received four years of seed funding from the Department of Medicine at ZSFG, Department of Epidemiology and Biostatistics, Helen Diller Family Comprehensive Cancer Center and School of Medicine Dean's Office for Population Health and Health Equity. The PRISE Center spent approximately 22% (\$73,300) of the year one seed funding budget of \$400,000.

The majority of planned FTEs for PRISE Center leadership (10% FTE each for 2 Co-Directors and 7.5% FTE each for 5 Program Leads) was covered using other funding sources. Additionally, staff joined the PRISE Center towards the end of year one, which considerably reduced anticipated year one expenses.

We anticipate increased spending in year two as staff and faculty leads transition more FTE to the PRISE Center and as funds are dedicated to support pilot projects that emerge from research partnerships developed during year one. We anticipate such pilot projects will lead to additional grants that will support PRISE Center faculty and staff, allowing us to save seed funds for new strategic initiatives.

PRISE Center Year Two Plans

The PRISE Center plans to accomplish the following milestones in year two.

- Solidify the PRISE Center governance structure and faculty affiliate model
- Develop a two-year strategic plan and a detailed implementation plan
- Continue to identify and apply for grant, contract and philanthropic funding opportunities
- Develop partnership guidelines
- Further develop collaboratives and build capacity of ZSFG/SFHN clinical units and SFDPH population health/behavioral health teams to incorporate implementation science research methods into healthcare delivery and public health improvement activities
- Develop joint programming in implementation science and health equity research with other UCSF centers and initiatives
- Host academic events in collaboration with partners and develop opportunities for sharing research findings
- Apply for funding to further develop training opportunities in implementation science and health equity (T32 NHLBI application currently in process)

Select Peer-Reviewed Publications of PRISE Center Faculty

[Factors Associated With Symptoms of Depression and Anxiety Among Women Experiencing Homelessness and Unstable Housing During the COVID-19 Pandemic](#). JAMA Netw Open. 2021 07 01; 4(7):e2117035. Riley ED, Dilworth SE, Satre DD, Silverberg MJ, Neilands TB, **Mangurian C**, Weiser SD. PMID: 34259851.

[Study Designs to Assess Real-World Interventions to Prevent COVID-19](#). Front Public Health. 2021; 9:657976. Digitale JC, Stojanovski K, McCulloch CE, **Handley MA**. PMID: 34386470.

[Concentrating Vaccines in Neighborhoods with High Covid-19 Burden. NEJM Catalyst: Innovations in Care Delivery](#). 2021. Rachel J. Stern, Henry F. Rafferty, Anna C. Robert, Carol Taniguchi, Blake Gregory, **Elaine C. Khoong**, **Margaret A. Handley**, Lukejohn W. Day, Ellen Chen.

[The Structural and Social Determinants of the Racial/Ethnic Disparities in the U.S. COVID-19 Pandemic. What's Our Role?](#) Am J Respir Crit Care Med. 2020 10 01; 202(7):943-949. **Thakur N**, Lovinsky-Desir S, Bime C, Wisnivesky JP, Celedón JC. PMID: 32677842.

[Impact of Racial Differences in Treatment Intensification and Missed Visits on Disparities in BP Control. Enhancing Recruitment and Retention of Minority Populations for Clinical Research in Pulmonary, Critical Care, and Sleep Medicine: An Official American Thoracic Society Research Statement](#). Am J Respir Crit Care Med. 2021 08 01; 204(3):e26-e50. **Thakur N**, Lovinsky-Desir S, Appell D, Bime C, Castro L, Celedón JC, Ferreira J, George M, Mageto Y, Mainous Iii AG, Pakhale S, Riekert KA, Roman J, Ruvalcaba E, Sharma S, **Shete P**, Wisnivesky JP, Holguin F. PMID: 34347574.

[Effectiveness of Adding a Mask Recommendation to Other Public Health Measures](#). Ann Intern Med. 2021 08; 174(8):1193. **Spinelli MA**, Glidden DV, Gennatas ED, Rutherford GW, Gandhi M. PMID: 34399080.

[Sociodemographics, Social Vulnerabilities, and Health Factors Associated with Telemedicine Unreadiness Among US Adults](#). J Gen Intern Med. 2021 Jul 30. Wray CM, Tang J, Shah S, **Nguyen OK**, Keyhani S. PMID: 34331214.

[Outcomes and costs of publicly funded patient navigation interventions to enhance HIV care continuum outcomes in the United States: A before-and-after study](#). PLoS Med. 2021 05; 18(5):e1003418. Shade SB, Kirby VB, Stephens S, Moran L, Charlebois ED, Xavier J, Cajina A, Steward WT, **Myers JJ**. PMID: 33983925.

[Addressing Gaps in Interpreter Use: Time for Implementation Science Informed Multi-Level Interventions](#). J Gen Intern Med. 2021 May 04. **Khoong EC**, Fernandez A. PMID: 33948799.

[Screening for Immigration-Related Health Concerns in a Federally Qualified Health Center Serving a Diverse Latinx Community: A Mixed Methods Study](#). J Immigr Minor Health. 2020 Oct; 22(5):988-995. Byhoff E, **De Marchis EH**, Gottlieb L, Halperin-Goldstein S, Nokes K, LeClair AM. PMID: 32277341.

[Digital adherence technology for tuberculosis treatment supervision: A stepped-wedge cluster-randomized trial in Uganda](#). **Cattamanchi A**, Crowder R, Kityamuwesi A, Kiwanuka N, Lamunu M, Namale C, Tinka LK, Nakate AS, Ggita J, Turimumahoro P, Babirye D, Oyuku D, Berger C, Tucker A, Patel D, Sammann A, Turyahabwe S, Dowdy D, Katamba A. PLoS Med. 2021 May 6;18(5):e1003628. doi: 10.1371/journal.pmed.1003628. eCollection 2021 May. PMID: 33956802

[Unmet Mental Health Need Among Chinese and Latino Primary Care Patients: Intersection of Ethnicity, Gender, and English Proficiency](#). J Gen Intern Med. 2020 04; 35(4):1245-1251. **Garcia ME**, Hinton L, Gregorich SE, Livaudais-Toman J, Kaplan C, Karliner L. PMID: 31667737.

*A full list of peer-reviewed articles utilizing implementation science research methods to address health disparities will be available on our website soon. <https://prise.ucsf.edu/resources>

Partnerships for Research in Implementation Science for Equity



Partnerships



Research



Education & Training

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