

FACT SHEET

Accelerating Change and Transformation in Organizations and Networks (ACTION)

Field Partnerships for Applied Research

The mission of AHRQ is to improve the quality, safety, efficiency, and effectiveness of health care by:

- Using evidence to improve health care.
- Improving health care outcomes through research.
- Transforming research into practice.

Introduction

Often, health services research findings are not implemented in practice and, thus, fail to improve the quality of health care that Americans receive. With its program, Accelerating Change and Transformation in Organizations and Networks (ACTION), the Agency for Healthcare Research and Quality (AHRQ) places the responsibility of investing in the implementation of good ideas, once proven, directly on those who produce, use, and fund such research. ACTION is a 5-year implementation model of field-based research that fosters public-private collaboration in rapid-cycle, applied studies. With a goal of turning research into practice, ACTION links many of the Nation's largest health care systems with its top health services researchers.

Mission

ACTION promotes innovation in health care delivery by accelerating the development, implementation, diffusion, and uptake of demand-driven and evidence-based products, tools, strategies, and findings. ACTION develops and diffuses scientific evidence

about what does and does not work to improve health care delivery systems. It provides an impressive cadre of delivery-affiliated researchers and sites with a means of testing the application and uptake of research knowledge. ACTION is the successor to the Integrated Delivery System Research Network (IDSRN), a 5-year implementation initiative that was completed in 2005.

Program Characteristics

ACTION includes 15 large partnerships (i.e., 15 prime contractors), each with a demonstrated capacity to “turn research to practice” for proven interventions targeting those who manage, deliver, or receive health care services. As a network, ACTION provides health services in a wide variety of organizational care settings to at least 100 million Americans. The ACTION partnerships span all States and provide access to large numbers of providers, major health plans, hospitals, long-term care facilities, ambulatory care settings, and other care sites. Each partnership includes health care systems with large, robust databases, clinical and research expertise, and the



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authority to implement health care interventions. (See box for ACTION partners and their collaborators.)

ACTION focuses on a wide variety of demand-driven, practical, applied topics of interest to the partnerships' own operational leaders as well as the project funders. The program emphasizes projects that are broadly responsive to user needs and operational interests and which are expected to be generalizable across a number of settings.

ACTION partnerships operate under multi-year cost reimbursement contracts. Proposals are solicited on a rolling basis throughout each of several years. Projects are rapid cycle; they are awarded under separate task orders and completed within 15 months, on average.

Resources

AHRQ is interested in hearing from organizations that may wish to sponsor, or suggest sponsors, for one or more projects. In 2005, 67 percent of support for ACTION's predecessor program, the IDSRN, was obtained from funding sources external to AHRQ. Funders have included the Centers for Disease Control and Prevention, Centers for Medicare & Medicaid Services, Department of Defense, Department of Homeland Security, HHS Office of Minority Health/Office of the Secretary, National Cancer Institute, National Institute of Mental Health, Office of the Assistant Secretary for Public Health Emergency Preparedness, and the Robert Wood Johnson Foundation. AHRQ anticipates that sources and amounts for ACTION funding may be similar to those of the IDSRN. Between 2000 and 2005, AHRQ awarded approximately \$26 million in funds to 93 projects conducted by 9 IDSRN partnerships.

Topics and Research Opportunities

AHRQ actively seeks input on research topics for consideration in developing future ACTION projects. Of particular interest are topics that fit within ACTION's unique research niche and have clear and direct relevance to practice and/or the organization and management of health care delivery.

Concept Nominations and Information

To nominate concepts for projects, send a 1- to 2-page description to Cynthia Palmer, ACTION Program Officer via E-mail (Cynthia.Palmer@ahrq.hhs.gov). Each concept should include:

- Brief rationale for the study.
- Suggested methods if known.
- Description of how findings may improve health care delivery/health outcomes i.e., how this work will help "turn research to practice."
- Timeframe (12 to 18 months maximum).
- Estimated total budget.

For more information about ACTION, project sponsorship, or concept nomination procedures, please contact:

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Details on the ACTION solicitation can be viewed in AHRQ's online contract archive at:
www.ahrq.gov/fund/contrarch.htm.

ACTION Partners and Their Collaborators

Partner	Collaborators
Abt Associates, Inc., Cambridge, MA	Geisinger Health System; Partners Health Care; Saint Vincent Catholic Medical Center; Maine Health Information Center; Hearthstone Alzheimer Care, Ltd.; Qualidigm; Quality Partners of Rhode Island; Altarum Institute; National Committee for Quality Assurance; Center for Information Therapy
American Association of Homes and Services for the Aging, Washington, DC	Evangelical Lutheran Good Samaritan Society; International Severity Information Systems; Institute for Clinical Outcomes Research; Kansas University Medical Center; Penn State Center for Health Care and Policy Research; Quality Partners of Rhode Island
American Institutes for Research, Silver Spring, MD	Carilion Health System; Geisinger Health System; Hospital Corporation of America; Mayo Clinic; VCU Health Systems; Clinical Resource Consultants, LLC; L&M Policy Research, LLC; Texas A&M University; Virginia Commonwealth University
Aurora Health Care, Milwaukee, WI	University of Wisconsin Medical School-Milwaukee Clinical Campus; Center for Urban Population Health; Urban Institute; Danya International, Inc.; University of Wisconsin Population Health Institute; University of Wisconsin Department of Industrial and Systems Engineering; University of Wisconsin School of Nursing; University of Wisconsin-Milwaukee College of Nursing
Boston University School of Public Health, Boston, MA	Four Veterans Integrated Delivery System Networks (VISNs 1, 3, 22, 23) in New England, New York/New Jersey, Southern California, Midwest; Boston Medical Center; Hennepin County Medical Center; Montefiore Medical Center
Denver Health, Denver, CO	Harborview Medical Center; Hennepin County Medical Center; New York City Health and Hospital Corporation; Parkland Health and Hospital System; University of Colorado Hospital
Health Research and Educational Trust, Chicago, IL	Arizona State University; Boston University School of Public Health; GroupHealth Cooperative; Harvard Medical School Department of Health Care Policy; New York University Robert F. Wagner Graduate School of Public Service; Northwestern University Kellogg School of Management; The Ohio State University School of Public Health; The University of North Carolina at Chapel Hill School of Public Health; The Wharton School University of Pennsylvania; University of California, Berkeley School of Public Health; University of California, Los Angeles School of Public Health; University of California, San Francisco, Institute for Health Policy Studies School of Medicine; University of Colorado at Denver Business School; University of Maryland; University of Michigan School of Public Health; University of Missouri School of Medicine; University of Southern California School of Policy, Planning and Development; University of Washington School of Medicine; University of Washington School of Public Health Health Research and Educational Trust, and Community Medicine; Blue Cross and Blue Shield of Minnesota School of Medicine; University of Washington School of Public Health and Community Medicine; Blue Cross and Blue Shield of Minnesota; Blue Shield of California; Priority Health; Sharp Health Plan; Highmark Blue Shield; Catholic Healthcare Partners; HCA Healthcare; Inland Northwest Health Services; John Muir/Mount Diablo Health System; Lehigh Valley Hospital and Health Network; Parkland Health and Hospital System; PeaceHealth; Providence Services; Sharp Healthcare; Spectrum Health; Sutter Health, Center for Health Management Research

Partner	Collaborators
Indiana University (IU), Indianapolis, IN	Regenstrief Institute; IU Center for Health Services and Outcomes Research; VA Center for the Implementation of Evidence Based Practice; IU Center for Aging Research; Indiana Children’s Health Services Research; Diabetes Prevention and Control Center; IU Medical Group-Primary Care Research Network; National Opinion Research Center; Regenstrief Center for Healthcare Engineering; Roudebush VAMC, Indianapolis Coalition for Patient Safety, Clarian Health Partners, Wishard Health Services, IU Medical Group
RAND Corporation, Santa Monica, CA	Alliance of Community Health Plans; American Medical Directors Association Foundation; Blue Cross Blue Shield Foundation and HSR Alliance; CIGNA; Highmark, Inc.; Centinela-Freeman Medical Center; Children’s Physicians Medical Group; Consumers Advancing Patient Safety; Dia de la Mujer Latina, Inc.; Harbor-UCLA Medical Center; Hennepin County Medical Center; Institute of Family-Centered Care; Kelsey Research Foundation and Kelsey-Seybold Clinic; Los Angeles County Department of Health Services – Public Health; Lumetra; Marshfield Clinic; MedStar Health; National Association of County and City Health Officials; National Committee for Quality Assurance; NIMH UCLA/RAND Center for Quality in Managed Care; Rochester IPA; San Francisco Department of Public Health Community Health Network; SSM Health Care; Strong Healthcare/ University of Rochester Medical Center; University of California-Los Angeles Healthcare; University HealthSystem Consortium; Veterans Affairs (VA) Center for the Study of Healthcare Provider Behavior (Los Angeles); VA Comprehensive Nursing and Rehabilitation Center, Washington, DC; WellPoint, Inc.
RTI International, Research Triangle Park, NC	Baylor Health Care System; Intermountain Healthcare; Providence Health System; UNC Health Care System; UPMC Health System
The CNA Corporation, Alexandria, VA	Sentara Healthcare; Thomas Jefferson University; Virginia Health Quality Center; Center for Excellence in Aging and Geriatric Health; Ivan Walks and Associates
University of California at San Francisco, School of Medicine, San Francisco, CA	Palo Alto Medical Foundation Research Institute; Sutter Health Institute for Research and Education
University of Iowa Center for Health Policy and Research, Iowa City, IA	Trinity Health; Veterans Affairs VISN15 (the Veterans Affairs Heartland Network); Iowa Foundation for Medical Care; Iowa Medicare Rural Hospital Flexibility Program; Iowa Hospital Association; Iowa Healthcare Collaborative
Weill Medical College of Cornell University, New York, NY	New York-Presbyterian Hospital and Healthcare System; Visiting Nurse Service of New York; Columbia University; New York Association of Homes and Services for the Aging; Group Health Incorporated
Yale New Haven Health Services Corporation, New Haven, CT	Yale University Schools of Medicine, Management and Public Health; Joint Commission on Accreditation of Healthcare Organizations; VHA (formerly the Voluntary Hospital Association); World Association for Disaster and Emergency Management; Connecticut Primary Care Association; Dartmouth Medical School New England Center for Emergency Preparedness

