

Journal of Public Health Management and Practice Template

Research full reports should be 1500-3500-word reports of original epidemiological/intervention research or program/policy evaluation.

Submissions may include **no more** than 5 tables or figures, although additional tables/figures as supplemental digital content may be included. The word limit does not include the abstract, tables, figures, references, or Implications for Policy & Practice.

Starting with page 2, you will find general instructions on using this template, which will help to speed up the processing of submitting your manuscript.

Sections, in part and in full, were taken from a couple of articles and the links to the articles can be found below:

https://journals.lww.com/jphmp/Fulltext/2018/03000/Community_Health_Workers_Addressing_Client.9.aspx

https://journals.lww.com/jphmp/Fulltext/2018/03001/Evaluation_of_an_Ecohealth_Approach_to_Public.6.aspx

Submit paper here: [JPHMP](#)

Find additional instructions here: [submitting files](#); [general manuscript guidelines](#)

≤150 characters, including spaces

Title: Community Health Workers: Addressing Client Objectives Among Frequent Emergency Department Users

First name followed by middle initial (if any) and last name, title, separated by semicolons

Authors: Bethany M. Kwan, PhD, MSPH; Amy Rockwood, MSW; Brian Bandle, MPH; Douglas Fernald, MA

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List entity where research was conducted and all involved departments/divisions

Author Affiliations: Department of Family Medicine, Adult and Child Consortium for Health Outcomes Research and Delivery Science, University of Colorado Anschutz Medical Campus, Aurora, Colorado (Dr Kwan); and University Emergency Medical Services, Buffalo, New York (Ms Rockwood)

List all grant numbers and entities that helped to support this submitted work

Funding: This program evaluation was funded by The Health Foundation for Western and Central New York. The HealthiER program was supported by Funding Opportunity Number CMS-1C1-12- 0001 from the Centers for Medicare & Medicaid Services (CMS), Center for Medicare and Medicaid Innovation

Indicate whether the authors have any financial relationships relevant to this submitted work

Note: this example is from the second article link provided on page 1

Financial Disclosure: Hung Nguyen-Viet was partly funded by the CGIAR research program on Agriculture for Nutrition and Health (A4NH).

Indicate whether the authors have any potential conflicts of interest to disclose

Conflicts of Interest: The authors declare that they have no conflicts of interest

List any persons that you would like to thank and acknowledge for their help in the preparation of this submitted work

▲ **Acknowledgements:** We acknowledge the contributions of other valued members of the program and evaluation teams, including Elizabeth Staton, technical writer, and Anthony Billittier, the medical director for the HealthiER program

Indicate whether a protocol approval was needed or not by an ethics committee to conduct this research

Note: this example is from the second article link provided on page 1

▲ **Human Participant Compliance Statement:** Ethical approval for this research was obtained from Hanoi University of Public Health on 19 February 2013 (Decision No 041/2013-HD3).

Structured, ≤300 words. Limit use of abbreviations and acronyms, and avoid general statements (eg, “the significance of the results is discussed”)

▲ **Abstract**

If applicable

Context:

Objectives: To evaluate effectiveness of a Community Health Worker (CHW) program designed 33 to address client objectives among frequent emergency department (ED) users

Design: Program 34 evaluation using secondary analysis of client objectives from program records. Client objectives 35 were characterized according to the World Health Organization’s social determinants of health 36 framework. Hierarchical generalized linear modeling was used to assess factors associated with 37 objective achievement.

Setting: An ED and the surrounding community in an economically 38 disadvantaged area of Buffalo, New York, United States.

Participants: 1600 adults over age 18 39 eligible for Medicaid and/or Medicare and who had at least two ED visits in the prior year.

Intervention: Clients worked with CHWs in the community to identify diverse needs and 41 objectives. CHWs provided individualized services to help achieve objectives.

Main Outcome Measure: Achievement of client-focused objectives.

Results: Most objectives pertained to 43 linkages to community resources and health care navigation, emphasizing chronic medical 44 conditions and connection to primary care. Clients and CHWs together achieved 43% of total 45 objectives. Objective achievement was positively associated with greater client engagement in 46 CHW services

Conclusions: Low objective achievement may stem from system and policy⁴⁷ level barriers, such as lack of affordable housing and access to primary care. Strategies for 48 improving client engagement in CHW services are needed.

Include 3-5 key words that describe the contents of the article

➤ **KEY WORDS:** community health workers, frequent emergency department use, health care reform

Research full reports should be kept to 1500-3500 words

➤ **Word Count:** excluding abstract, tables, figures, references, Implications for Policy & Practice: 2368

Introduces the overarching topic/issue your manuscript addresses and provides enough information for the general reader to understand the scope of the report

Suggested word count of 300-500 words

➤ **Introduction**

Describe overall method used to study public health question. If your study involved human participants, be sure to indicate that the study protocol has been reviewed and approved by an institution review board (IRB) or other independent ethics committee and that informed consent has been obtained for all participants

➤ **Methods**

Program description and setting

These are headings and can be utilized to break up the section. Only capitalize first letter of the first word

Measures and variables

Client objectives

This is a subheading. Only capitalize first letter of the first word

Include no more than 5 tables or figures. Additional figures/tables can be listed below under Supplemental Digital Content

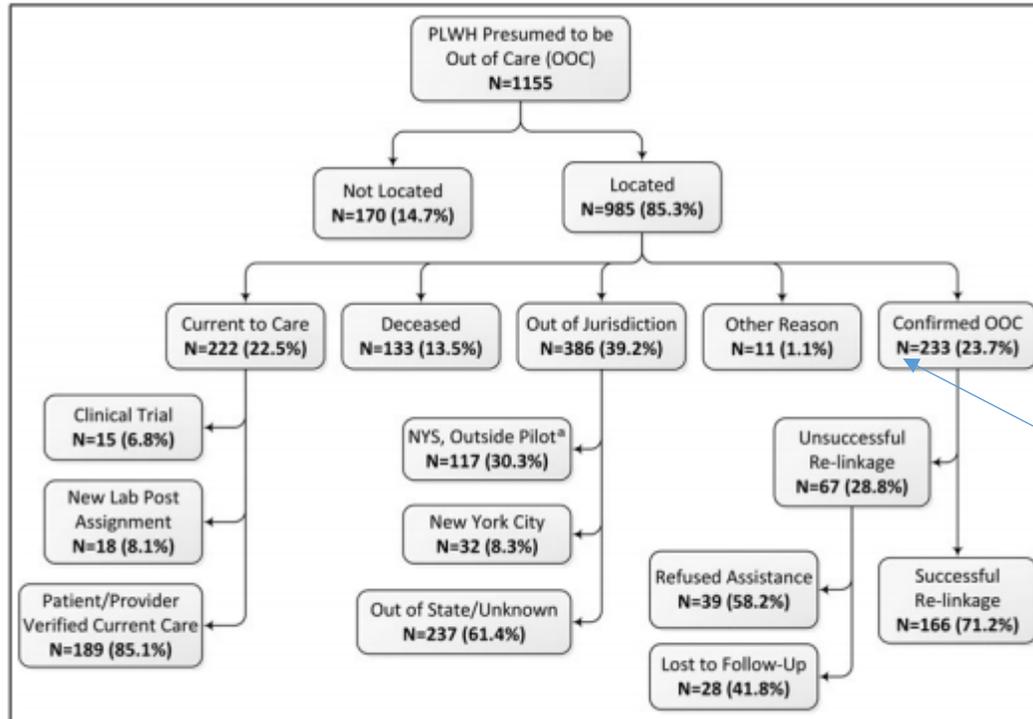
➤ **Results**

Sample characteristics

This is a heading. Only capitalize first letter of the first word

Figure-Flowchart

Cite figures consecutively in your manuscript
Note: Figures should be submitted as separate files



Number figures in the order in which they are discussed, and give description here

To adhere to current manuscript standards, please lowercase “n”

FIGURE 1 New York State ExPS Pilot Project Outcomes Abbreviations: ExPS, Expanded Partner Services; NYS, New York State; PLWH, persons living with diagnosed HIV infection

^aThis subset of out-of-jurisdiction cases constitute the “not eligible for ExPS Intervention” comparison group.

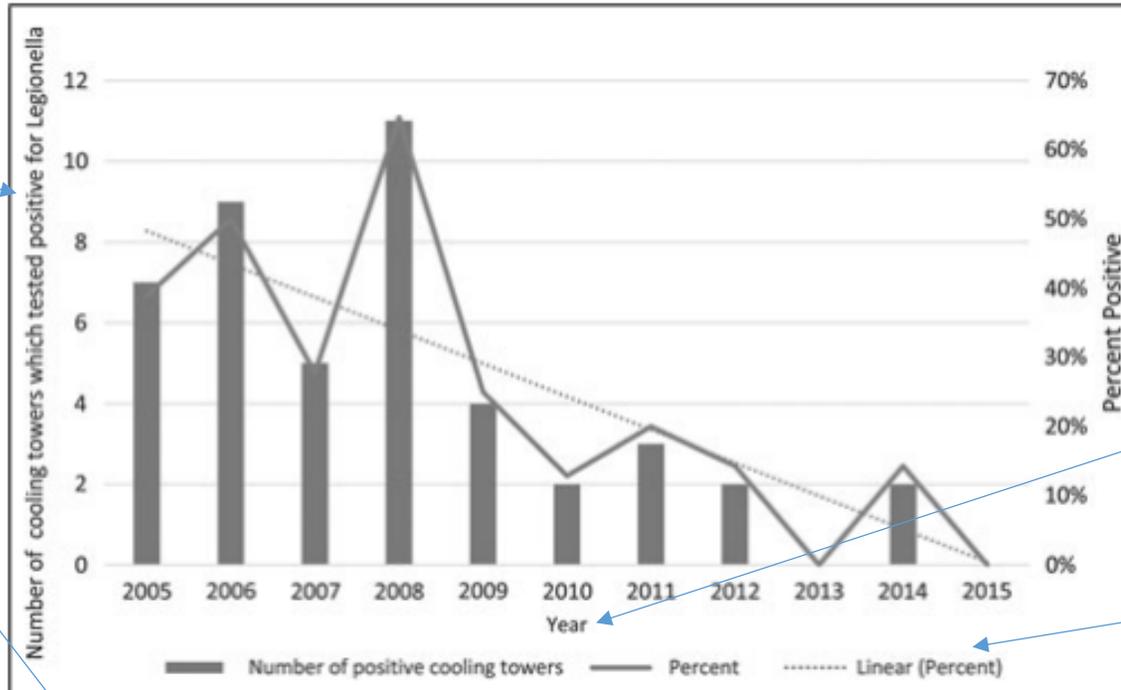
If superscripts are used within figure, specify what they represent

Find this figure in the open-access research full report at
https://journals.lww.com/jphmp/Fulltext/2017/11000/Implementation_of_a_Legionella_Ordinance_for.10.aspx

Figure

Cite figures consecutively in your manuscript

Note: Figures should be submitted as separate files



Include y-axis label

Number figures in the order in which they are discussed, and give description here

Include x-axis label

Include a legend to help readers understand the charted data

Below figure, put abbreviations

FIGURE 1 Number and Percentage of Cooling Towers From Multifamily Housing Units That Tested Positive for Legionella Over Time in Garland, Texas^a

Abbreviation: HVAC, heating, ventilating, and air-conditioning.

^aBetween 2005 and 2007, there were 18 cooling towers. The number of cooling towers decreased over time as multifamily housing units replaced aging HVAC systems; 17 cooling towers in 2008, 16 cooling towers in 2009, 15 cooling towers in 2011, and 14 cooling towers in 2012-2015. Since the number of cooling towers in 2010 is unknown, a value of 15.5 was assigned.

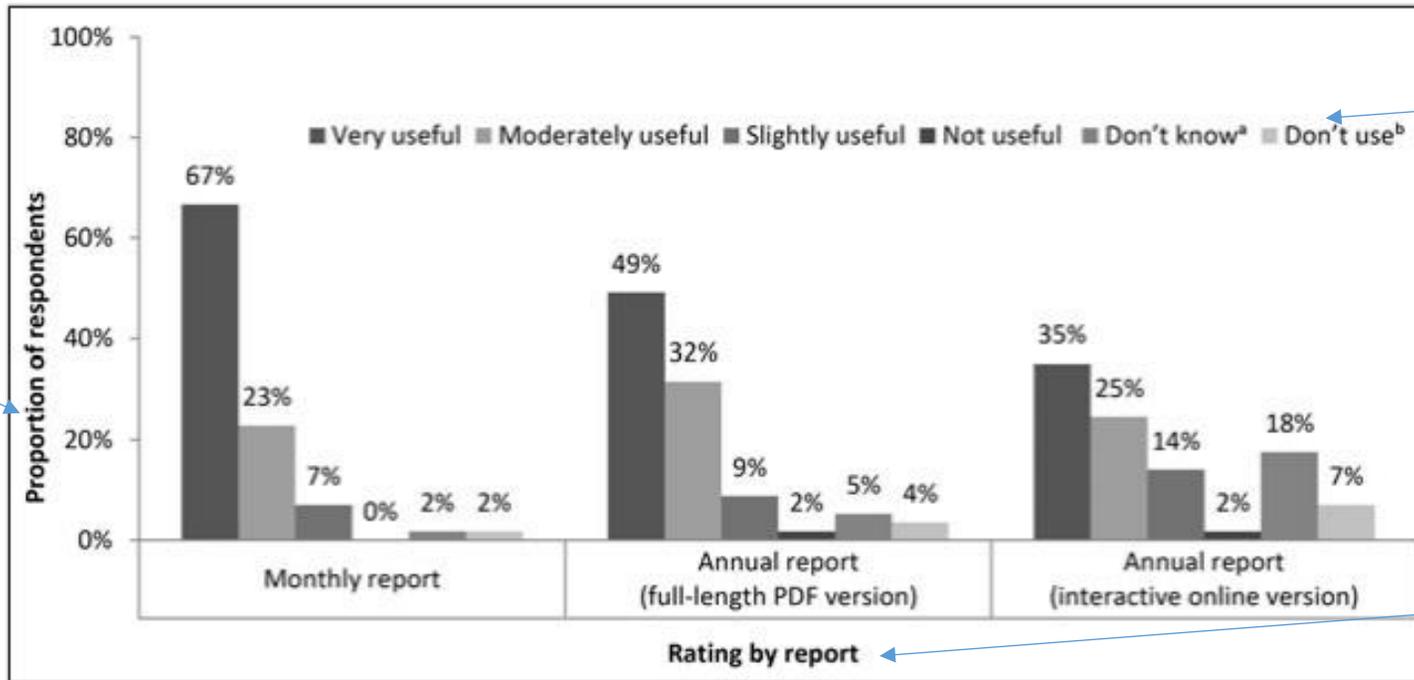
If superscripts are used within figure or in figure description, specify what they represent

Find this figure in the open-access research full report at https://journals.lww.com/jphmp/Fulltext/2017/11000/Implementation_of_a_Legionella_Ordinance_for.10.aspx

Figure

Cite figures consecutively in your manuscript

Note: Figures should be submitted as separate files



Include y-axis label

Include a legend to help readers understand the charted data

Include x-axis label

Figure 1 Usefulness Rating by Surveillance Report

^aIn the survey, “Don't know” was described as: “I haven't used the report yet, but I might use it in the future.”

^bIn the survey, “Don't use” was described as: “I don't need to use the report at all.”

If superscripts are used within figure, specify what they represent

Number figures in the order in which they are discussed, and give description here

Table

Each table should be in a separate document; number tables consecutively

For tables, give description here

TABLE Expanded Partner Services Cohort Determined to Be Truly Out of Care and Successfully Relinked to Care

	Total		Relinked to Care		P
	n	%	n	% ^a	
Total confirmed out of care	233	100.0	166	71.2	
Gender					.30
Female	89	38.2	67	75.3	
Male	142	60.9	97	68.3	
Transgender	2	0.9	2	100.0	
Age, y					<.001 ^b
20-29	38	16.3	21	55.3	
30-39	50	21.5	31	62.0	
40-49	63	27.0	48	76.2	
50-59	66	28.3	51	77.3	
>60	16	6.9	15	93.8	
Race/ethnicity					<.005
White, non-Hispanic	61	26.2	45	73.8	
Black, non-Hispanic	117	50.2	92	78.6	
Other	21	9.0	10	47.6	
Hispanic	30	12.9	18	60.0	
Unknown	4	1.7	1	25.0	
Risk					.89
MSM	87	37.3	59	67.8	
IDU	28	12.0	21	75.0	
MSM/IDU	4	1.7	3	75.0	
Heterosexual ^c	86	36.9	61	70.9	
Unknown or missing	28	12.0	22	78.6	

If $P \geq .01$, express P values to 2 digits, regardless of whether it's significant or not.

If $P < .01$, express it as an actual P value to 3 digits, unless $p < .001$

Can leave P value to 3 digits if rounding to 2 digits would make it nonsignificant

Below table, put abbreviations

Abbreviations: IDU, intravenous drug user; MSM, men who had sex with men.

- ^aRepresents row percent.
- ^bTest for trend.
- ^cIncludes females presumed heterosexual contact.

If superscripts are used within table, specify what they represent

Bulleted format, 100-200 words max. Implications may address relevance to the development, adoption, implementation, or evaluation of public health policy or the practice of implementing such public health policies or practices in “real world” settings. Avoid speculation and over-generalization

Implications for Policy & Practice

Health care organizations facing decisions about what service models best meet the needs of their patient populations should bear in mind 3 key findings

- First, a significant factor in achieving objectives was keeping clients engaged and in contact with their CHWs—often for 6 months or longer. Patients should have
- Second, CHWs were most effective at addressing objectives for which policy and program partnerships were in place to facilitate access to resources, such as partnerships with primary care. Health care organizations employing CHWs should identify priority objectives among their particular population and establish policies and partnerships CHWs will need to be effective.
- Third, among low-income populations, many objectives pertain to factors upstream from health outcomes—that is, SDOH—which can be difficult to address given the complex, interrelated nature of systems and culture of education, employment, poverty, racism, oppression, and access to care.³⁸

If there are no direct implications for policy or practice because the article introduces a new research method or conceptual framework, it is still important for the author(s) to identify the relevance of the work to future policy or practice work. Manuscripts that address topics for which this relevance cannot be articulated may not be suitable for the JPHMP

Summarize your findings and conclude with a general implication what they pose for public health

Discussion and Conclusion

You may include additional tables/figures as supplemental digital content, which will be seen by readers in exact format that file is submitted

Supplemental Digital Content

...and priorities (see Supplemental Digital Content Table S1, available at <http://links.lww.com/JPHMP/A295>).

Note: Each supplemental figure/table must be referenced in-text

Numbered format, with each reference on a separate line beginning with a number and ending with a period.

Limit number of references to 35

References

Journal Article

1. Author(s) last name followed by first and middle initial, if given. Article full title. *Abbreviated journal title*. Date;volume (issue #):inclusive pages.

1. Riley WJ, Moran JW, Corso LC, Beitsch LM, Bialek R, Cofsky A. Defining Quality Improvement in Public Health. *J Public Health Manag Pract*. 2010;16(1):5-7.

Government/Organization Report

1. Author(s) last name followed by first and middle initial, if given. Organization full title. Title of specific item. City, State. Web site URL. Published [date]. Updated [date]. Accessed [date].

Example 2 is a monograph. Use book style for monographs.

1. World Health Organization. Equitable access to essential medicines: a framework for collective action. http://whqlibdoc.who.int/hq/2004/WHO_EDM_2004.4.pdf. Published March 2004. Accessed February 21, 2018.
2. Johnson DL, O'Malley PM, Bachman JG. *Secondary School Students*. Bethesda, MD: National Institute on Drug Abuse; 2001. *Monitoring the Future: National Survey Results on Drug Use, 1975-2000*; vol 1. NIH publication 01-4924. http://www.monitoringthefuture.org/pubs/monographs/vol1_2000.pdf. Published August 2001. Accessed February 21, 2018.

Book

1. Author(s) last name followed by first and middle initial, if given. Chapter title. In: Editor(s). *Book title*. [Edition, if not first edition]. City, State (or country) of publisher: Publisher's name; copyright year:inclusive pages. URL. Accessed [date].

1. Novick L. The Case Study Method in Public Health. In: Gaertner R, Oberle K. *JPHMP's 21 Public Health Case Studies on Policy & Administration*. Philadelphia, PA: Wolters Kluwer; 2017:1-8. Accessed February 21 2018.

Web Site

1. Organization responsible for site full title. Title of the specific item cited (if none is given, use the name of the organization responsible for the site). Name of the Web site. URL. Published [date]. Updated [date].

1. National Center for Healthy Housing. Healthcare finance of healthy homes. <http://www.nchh.org/Resources/HealthcareFinancing.aspx>. Accessed February 10th, 2018.