

## Policies and Procedures Updated April 2020

*Approved by the CPCRN Steering Committee on 5/12/20*

Elements of a Vision for CPCRN.....	2
CPCRN Logic Model.....	3
Expectations for Investigators Funded through CPCRN .....	4
CPCRN Progress Reporting: Overview of Reporting Obligations .....	6
Steering Committee Roles and Responsibilities .....	7
Coordinating Center Roles and Responsibilities.....	8
CPCRN New Workgroup Formation Process .....	9
CPCRN Workgroup Best Practices .....	10
Guidelines for Collaboration .....	12
Funding Acknowledgment Policy.....	14
Cooperative Agreement Numbers (2019-2024).....	14
CDC Publications Clearance Policy .....	15
CPCRN Communications Plan.....	15
Affiliate Member Policy .....	16
Appendix A CPCRN Strategic Plan.....	18
Appendix B CDC Impact Framework .....	23
Appendix C Workgroup Progress Report.....	24
Appendix D CPCRN Workgroup Formation 1-Page Concept Paper.....	26
Appendix E CPCRN Workgroup Charter.....	27
Appendix F Affiliate Member Application Form.....	28

### Funded CPCRN Centers (2019-2024)

CPCRN Center	Cooperative Agreement #
<a href="#">Colorado School of Public Health</a>	U48 DP006399
<a href="#">Emory University</a>	U48 DP006377
<a href="#">New York University School of Medicine - CUNY</a>	U48 DP006396
<a href="#">University of Arizona</a>	U48 DP006413
<a href="#">University of Iowa</a>	U48 DP006389
<a href="#">University of North Carolina at Chapel Hill</a>	U48 DP006400
<a href="#">University of South Carolina</a>	U48 DP006401
<a href="#">University of Washington</a>	U48 DP006398

## **Elements of a Vision for CPCRN**

**Mission:** Accelerate the adoption and implementation of evidence-based cancer prevention and control strategies in communities, enhance large-scale efforts to reach underserved populations and reduce their burden of cancer, deepen our understanding of the predictable processes that achieve those goals, and develop the dissemination and implementation (D&I) science workforce in cancer prevention and control.

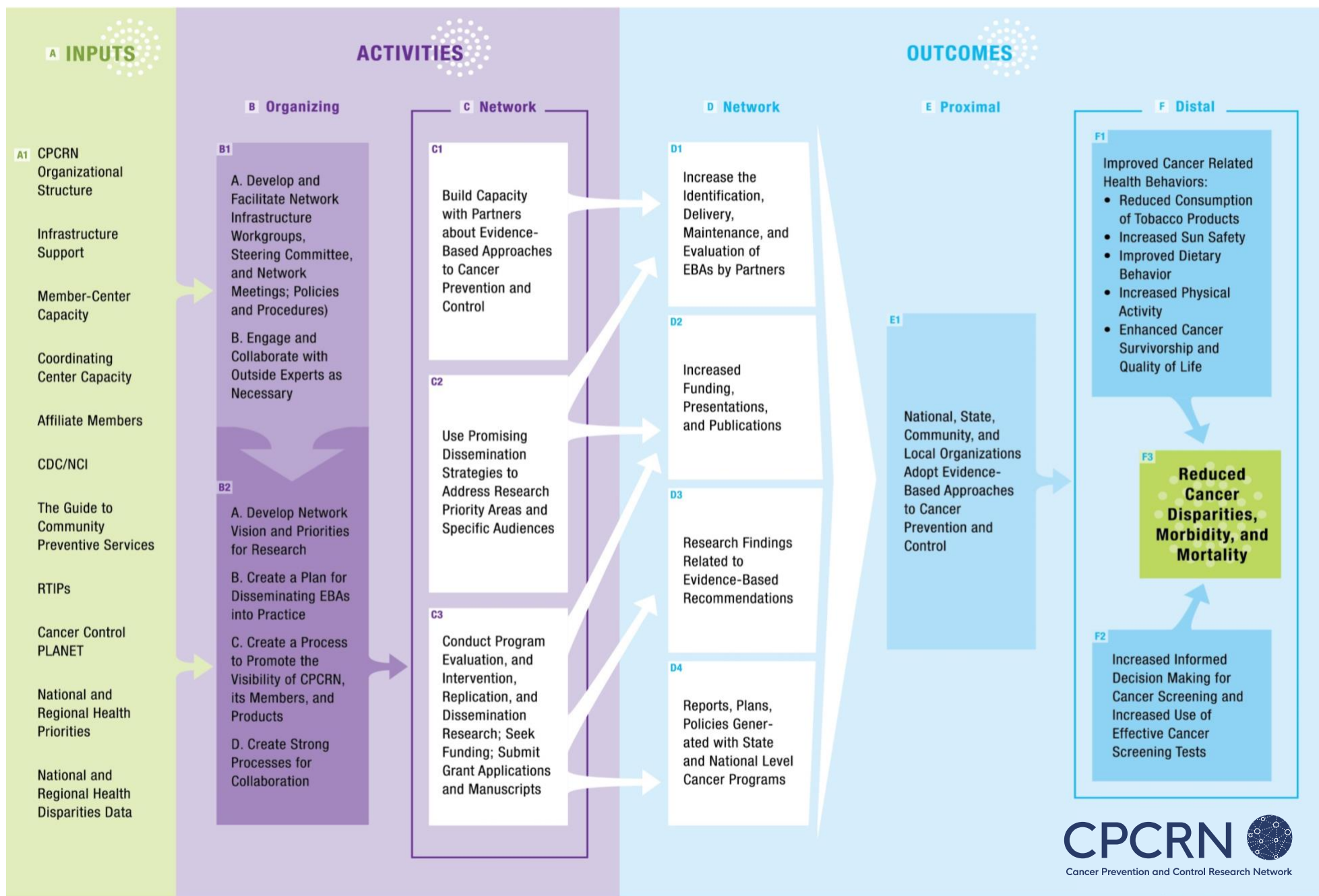
**Vision:** Community-based agencies and organizations successfully implement cancer prevention and control strategies that are effective in reducing cancer disparities.

Working together, the CPCRN Collaborating Centers, the Coordinating Center, federal agency partners, and affiliates are advancing the science and practice of cancer prevention and control in ways that transcend efforts by each individual center. Each center brings unique and complementary expertise, as well as access to diverse study populations in a wide variety of geographical settings. Collectively and individually, CPCRN has established an extensive infrastructure of collaborative research and practice partnerships across community organizations, governmental agencies, and academic/research institutions. This combination of technical skills, scientific expertise and collaboration across disciplines enables us to respond to long-standing and emerging cancer control needs with a focus on practical implementation, dissemination, and community-engaged research.

### Priority Areas

- Enhance large-scale efforts to reach, engage, and provide service to underserved populations with the aim of building community capacity to reduce cancer disparities
- Identify, develop, and apply rigorous research methods for studying dissemination and implementation processes
- Contribute to and use theory-based models; assess their utility in guiding dissemination and implementation efforts across diverse settings, populations, and conditions
- Develop and promote the use of theory-based, standardized metrics for measuring dissemination and implementation processes and outcomes
- Generate and synthesize research findings to guide practice and policy decisions
- Improve information exchange between practitioners and investigators across all phases of the research project (i.e., from study design through dissemination of research results)
- Create and advance community partnerships for dissemination and implementation processes.

# CPCRN Logic Model



## **Expectations for Investigators Funded through CPCRN**

Aligned with the Network Strategic Plan (Appendix A), the objectives below describe the mutually agreed upon expectations for participation in the network:

- 1.1 Conduct cross-center collaborative projects with broad CPCRN investigator engagement focused on:
  - extending the knowledge base of processes that facilitate the translation of evidence into practice
  - evaluating the implementation of existing cancer prevention and control strategies in varying settings (e.g. rural, FQHCs)
  - developing, testing, and implementing new evidence-based interventions
  - exemplifying partnership and action research, for example by supporting and furthering the missions of collaborating social service/public health organizations.
  - reaching underserved populations to: reduce the prevalence of cancer risk factors and cancer risk in communities; increase the impact of cancer screening; improve the health of cancer survivors, and/or reduce health disparities.
- 1.2 Each CPCRN Workgroup and Collaborating Center will contribute multiple products including, but not limited to:
  - Presentations at national and local conferences
    - Conduct at least 2 presentations annually on CPCRN, including CDC and NCI presentations.
  - Publications
    - Have one paper or a major symposium (e.g., highlighted panel or coordinated papers) accepted per year on the activities of the full CPCRN. Suggested conferences are the CDC Cancer Conference when offered and/or at least one other national conference.
    - Publish at least one paper annually on the progress and contribution to population cancer control (e.g. workgroup formation, partnership building process, methods, outcomes).
    - Conduct and publish at least one scoping / systematic review or commentary related to EBI adoption, where relevant and appropriate to workgroup activities.
  - One or more collaborative grant submissions
  - Toolkits
  - Training materials
  - Success stories
- 1.3 To utilize CPCRN expertise and to further develop CPCRN collaboration, CPCRN investigators will consider and/or recommend network members for external committees (e.g. ACS Guideline Committee) and collaborative authorship opportunities such as books and reports.

### **Community Engagement**

- 1.4 Develop and sustain engaged relationships with community partners, particularly those engaged with underserved populations.
- 1.5 Bring substantive expertise to the work of national and state government, non-profit organizations, agencies and coalitions (e.g., Roundtables), and other stakeholder audiences.
- 1.6 Serve on the board or advisory/steering committee of an organization or coalition whose work relates to CPCRN, when applicable

- 1.7 Collaborate with community partners, practitioners, or organizations on scientific presentations and/or publications, when applicable
- 1.8 The Coordinating Center will facilitate increased visibility of the network's contributions and expertise within academic and non-academic channels.

**Capacity Building and Career Development**

- 2.1 Develop, implement, and disseminate high quality training experiences and materials to relevant organizations
- 2.2 Engage junior faculty, post-doctoral fellows, and students in the work of the network
- 2.3 Build a social and professional community of cancer prevention and control-focused public health and implementation science researchers
- 2.4 Attend and present at relevant cancer prevention and control science-related meetings.

**Reporting and Requirements**

- 3.1 Produce and update annually for distribution to centers and federal agency partners a two-page Progress Report description of workgroup efforts, partners, and products anticipated in the next year, including a contact for more information. If there is no proposed activity, include plans for closing the workgroup, including distribution of products.
- 3.2 Develop and update a work plan annually for the next year as part of the annual progress reporting.
- 3.3 Contribute at least 50% of resources towards cross-center collaborations.
- 3.4 Include a funding acknowledgment and disclaimer for all communications produced under the CPCRN cooperative agreement.

## **CPCRN Progress Reporting: Overview of Reporting Obligations**

This document outlines CPCRN's progress reporting obligations, developed by the Coordinating Center through extensive work with the network centers and funders. The progress reporting data will be used to show the value added of funding this research network and show what can be accomplished together that might not be possible without the funding, infrastructure, resources, and colleagues provided by the network.

Progress reports are due yearly on December 15<sup>th</sup> for the previous September 30<sup>th</sup>-September 29<sup>th</sup> grant period. The network progress report includes:

### **1. Individual Network center reporting**

Network centers will use the CPCRN online progress reporting tool at <http://cpcrn.org/progresstool/> to submit yearly progress reports. Informed by the CDC's Science Impact Framework (Appendix B), data will be collected in the categories below:

- Report summary
- Grant applications
- Publications
- Presentations
- Training and workshops
- Reports, plans, or policies generated with state and national programs
- Research activities
- General dissemination communications
- Quotable feedback and anecdotes
- Requests for scientific expertise
- Catalyzing action
- Effecting change
- Awards/honors
- Mini-grants

### **2. Workgroup reporting**

Workgroup Chairs are responsible for submitting a charter form and a 2-3 page narrative report (in MS Word format) to the Coordinating Center each year using the template in Appendix C. A sunseting workgroup must submit a final report with plans for completing their work and distributing products.

Workgroup reports will include:

- List of workgroup contributors
- Number of workgroup meetings
- Summary of workgroup progress
- Plan of work for the next year
- List of all workgroup publications during the reporting period
- List of all workgroup grant applications during the reporting period

### **3. Coordinating Center reporting**

The Coordinating Center will submit an annual progress report to the Funders detailing Coordinating Center activities around:

- Organizing collaborative research activities with network members, partners, and affiliates
- Evaluating network activities and disseminating network products.

## **Steering Committee Roles and Responsibilities**

### **1. Steering Committee Co-Chairs**

- a. Facilitate Steering Committee planning and setting overall strategic direction for the next year, and future years
- b. Lead the Steering Committee's development of network-wide collaborations, and model cross-center collaboration through direct and visible actions
- c. Generate and facilitate discussion among PIs and the Coordinating Center to help develop short and long-term plans to achieve priority performance indicators
- d. Coordinate with funders to clarify expectations and assure that Steering Committee activities are consonant with these expectations
- e. Assure that the Steering Committee is adhering to agreed-upon timelines and is accountable in meeting benchmarks
- f. Proactively facilitate potential network-wide collaborations and among multiple centers.

### **2. Individual PIs (and designated Co-P.I., where appropriate)**

- a. Attend and actively participate in Steering Committee planning and discussion to stimulate collaborations
- b. Actively participate in at least one cross-center workgroup
- c. Provide leadership within their own centers to identify and bring other network faculty resources/talent into the collaboration process as appropriate

### **3. Steering committee as a whole**

- a. Ensure CPCRN activities are in alignment with the mission, vision, logic model/performance indicators, network strategic plan, and funder expectations
- b. Annually review the mission of the network and all other policy documents and make revisions as needed to ensure the network will accomplish its goals
- c. Review affiliate membership applications and make determinations regarding approval
- d. Stimulate cross-center collaboration to assure the network adds overall value
- e. Move forward/participate in discussion of action plans to generate cross-center CPCRN projects/products
- f. Actively participate in workgroups to contribute to specific plans for projects/products
- g. Discuss all potential workgroups, approve workgroup formation, and provide feedback in the planning and development of workgroup projects.

### **Coordinating Center Roles and Responsibilities**

1. Facilitate function of CPCRN workgroups and Steering Committee
  - a. Develop and implement a network strategic plan in conjunction with the Steering Committee
  - b. Facilitate a process for new workgroup formation
  - c. Work closely with the Steering Committee and Steering Committee Co-Chairs to ensure CPCRN activities are in alignment with the mission, vision, logic model/performance indicators, and funder expectations
  - d. Manage conflicts as they arise (*See details in the Guidelines for Collaboration on page 12.*)
  - e. Schedule and/or obtain call-in numbers for conference calls for workgroups and Steering Committee
  - f. Share workgroup minutes on the website
  - g. Provide targeted literature searches for CPCRN workgroups, if requested
  - h. Other tasks as determined by workgroups
  - i. Advise and? assist with implementation of multi-site data collection initiatives
2. Plan and facilitate meetings
  - a. Develop meeting agendas
  - b. Compile and distribute meeting materials
  - c. Select meeting venues
  - d. Reserve needed audiovisual equipment and coordinate presentations with speakers
3. Maintain the CPCRN website ([www.cpcrn.org](http://www.cpcrn.org))
  - a. Maintain current calendar, including workgroup and Steering Committee conference calls, meetings, and events of interest to the network
  - b. Share Steering Committee meeting minutes to Google Drive
  - c. Share funding opportunities
  - d. Update member directory
  - e. Share PowerPoint presentations from network meetings
  - f. Update workgroup information and membership
  - g. Maintain automated functions allowing workgroups and the Steering Committee to send emails via the website
4. Prepare and help draft documents related to the CPCRN policies and procedures
  - a. Draft policies and submit to Steering Committee for input and approval
  - b. Provide other documents as designated by the Steering Committee
5. Assist in the implementation of the communications plan for the network
6. Prepare summary documents and presentations about the CPCRN
7. Coordinate CPCRN reporting and evaluation



## CPCRN New Workgroup Formation Process

CPCRN utilizes a flexible, inclusive process to develop new CPCRN cross-center workgroups. Time will be allotted during Steering Committee meetings for principal investigators, co-investigators, project directors, and other network members to pitch research ideas and find collaborators. This process will allow workgroups to emerge organically and then dissolve when their work is complete. In order to present a workgroup idea to the Steering Committee, network members should:

- Contact the Coordinating Center to request time on the Steering Committee agenda
- Develop a 1-page concept paper and submit it to the Coordinating Center for dissemination throughout the network (Appendix D). The concept paper should include a description of the proposed workgroup topic, potential lead investigator(s), brief rationale, preliminary planned activities, general timeline, and estimated resources needed. Center PIs will distribute all 1-page concept papers widely within their centers, with special consideration to engage junior faculty, co-investigators, and project directors.
- Communicate with interested collaborators after the Steering Committee meeting to determine if the project will move forward and become a CPCRN workgroup.
- Collaborate with workgroup members to develop a workgroup charter (Appendix E) and submit it to the Coordinating Center at least one week before the next Steering Committee meeting. The Coordinating Center will disseminate the workgroup charter.
- Prepare a 5-minute presentation for the Steering Committee on key aspects of the workgroup charter. The presentation will be followed by up to 10 minutes for Steering Committee questions and discussion.
- As long as there are no major objections from the Steering Committee, the workgroup will be approved after discussion.
- **Please note:** If there is significant overlap among workgroup concepts, the Steering Committee will work to consolidate the ideas into a single workgroup.
- **Please also note** that cross-center workgroup concepts may be related to or informed by Collaborating Center core project ideas, but should not be completely overlapping work. Cross-center workgroups should reflect collaborative projects formed between at least 2 Collaborating Centers around mutual topics of interest and include sufficient investment of time and resources by Collaborating Centers to make the work possible.

Once a workgroup is formed, CPCRN workgroups are expected and encouraged to use Coordinating Center resources such as web conferencing. Workgroup chairs will regularly report on workgroup activities during Steering Committee calls, and workgroup productivity will be monitored through CPCRN progress reports.

In the spirit of the network, CPCRN centers are expected to have significant involvement in cross-center workgroups and to contribute at least 50% of their resources towards these collaborations.

### Workgroup Guidelines:

1. A workgroup must be focused on one or more specific projects with deliverables (e.g., a grant, a publication, survey development, data collection).
2. Leadership for the workgroup must be identified, typically a chair and co-chair from different network centers.
3. Steering Committee consensus should be developed around priority ideas and the new workgroup must be approved by the Steering Committee.
4. All network members should have the opportunity to participate if they choose.
5. Workgroups must be formally established and group objectives set.

## **CPCRN Workgroup Best Practices**

### **Joining a Workgroup**

Workgroup calls are open to all CPCRN members who plan to participate and contribute to the workgroup. To join a workgroup and receive regular communications about the workgroup, please ask your center's Project Director to add you to the workgroup in the CPCRN Directory. Once you've been added to the workgroup in the directory, you'll have access to the workgroup Google Drive, and you'll be included in the workgroup email distribution list.

### **Emailing Workgroup Members**

Please use the [Email Members](#) feature on the CPCRN website for all workgroup emails. Workgroup membership changes over time. By using the Email Members feature, you will always use the most up-to-date list of workgroup members. *As a best practice, do not simply reply all to previous emails as the list may be outdated.* Please use discretion when sending mass emails via the workgroup Email Members feature.

### **Web Conferencing**

The CPCRN Coordinating Center encourages all workgroups to use Zoom for workgroup meetings. The Coordinating Center is able to set up a recurring Zoom meeting for the workgroup. Alternatively, workgroup Co-Chairs or Project Directors may set up Zoom meetings from their own university's account. Workgroup Co-Chairs and Project Directors are responsible for sharing meeting documents from their computer via Zoom. Workgroup meetings don't require a Coordinating Center host. However, the Coordinating Center team is available to assist when notified in advance. Members should turn on their web cameras whenever possible, as it helps us build relationships across the distance. All Zoom meetings must be recorded and made available upon request to those who may have missed the call.

### **Google Drive**

All workgroups have shared storage space in Google Drive. Each workgroup member receives an invitation to the workgroup Google Drive when they're added to the workgroup in the CPCRN directory. Within one week of each workgroup meeting, workgroup Project Directors should add meeting minutes to Google Drive and email the document's Google Drive link to all workgroup members using the [Email Members](#) feature. Other workgroup documents and collaborative work should also be stored in Google Drive where all members can access it.

### **Meeting Frequency**

Workgroups typically meet 1-2 times a month, with progress on workgroup activities occurring between meetings. Depending on the workgroup's activities, more or less frequent meetings may be appropriate. Workgroups are encouraged to break into subgroups as needed.

### **Workgroup Project Directors**

Workgroup Project Directors should be identified in the workgroup's charter. Typically, workgroup Project Directors are the Co-Chairs' Centers' Project Directors, but alternate staff may be identified. These workgroup Project Directors share the responsibility for coordinating workgroup activities, providing timely communications to network members, hosting Zoom meetings, taking meeting minutes, adding minutes and other documents to the workgroup Google Drive, and drafting annual workgroup progress reports for review/edits/approval by the workgroup's Co-Chairs. Member centers are expected to contribute at least half of their resources and time towards cross-center network activities, which should include, in part, Project Director time managing the above tasks to help optimize workgroup productivity.

**Adding Workgroup Meetings to the CPCR Calendar**

All workgroup meetings must be added to the [CPCR calendar](#). To add a workgroup meeting to the CPCR calendar, the workgroup Co-Chairs or Project Directors should email the call date and time to the Coordinating Center ([beckylee@unc.edu](mailto:beckylee@unc.edu) and [alexayoung@unc.edu](mailto:alexayoung@unc.edu)) with the following information:

- 1) Do you need a Zoom link assigned, or have you already created one (if the latter, please send it)?
- 2) Do you want the Coordinating Center to send out meeting invitations through Google calendar, or will the Project Director send out invitations separately?

**Guidelines for Collaboration  
(revised July 2018)**

---

**Workgroup:** *A group of people from two or more centers who collaborate on tasks/projects to meet goals around a common theme.*

---

CPCRN workgroups operate under an “opt in” model. That is, no CPCRN centers or affiliates are required to participate in any specific workgroup activities, but all CPCRN centers are expected to contribute to cross-center workgroups. Participation in individual workgroups is voluntary, and involvement with any CPCRN workgroup requires a minimum level of engagement. This minimum level of engagement is intended to: (1) ensure consistency and continuity in participation; (2) facilitate shared ownership of workgroup products; (3) ensure fairness in workgroup members’ contributions and recognition for those contributions; and (4) facilitate timely progress toward workgroup goals. With these goals in mind, CPCRN teams and individual members adopt the following guidelines for collaboration:

**Setting Expectations**

- Workgroup member roles are clearly defined.
- Workgroup members discuss and agree upon team norms that will facilitate collaboration.

**Contribution/Engagement**

***Workgroup Members:***

- To support workgroup goals, individual members volunteer to lead or become meaningfully involved with research activities. These include, but are not limited to:
  - Sub-committee involvement
  - Development and management of IRB applications
  - Research design, recruitment, qualitative/quantitative data collection/analysis
  - Contacting and engaging partner organizations
  - Drafting and reviewing abstracts, presentations, and manuscripts
  - Grant proposals
  - Trainings/workshops
  - Intervention development and evaluation
- Timely and thorough feedback on all work-related matters is expected.
- Network centers send members to national conferences, stakeholder meetings, and other public venues to present CPCRN work.
- Network centers contribute resources towards workgroup expenses such as participant incentives, transcription, publication fees, etc.

***Workgroup Chairs:***

- Workgroup chairs provide members with multiple and varied opportunities for involvement.
- Chairs, or their representatives, maintain and distribute meeting agendas and minutes to facilitate inclusion of those members who cannot attend a meeting.
- When appropriate, chairs initiate smaller-scale, sub-committee meetings to catalyze progress.
- Chairs announce plans for workgroup products in both meetings and email correspondence and provide an opportunity for each center to participate.
- Chairs give team members sufficient time to provide feedback on products including but not limited to abstracts, manuscripts, posters, data collection instruments, infographics, and data briefs, typically 1-3 weeks depending on the complexity of the request.

## Attendance

- Regular and timely attendance to meetings is encouraged.
- Meetings have a defined purpose and are efficient to make the best possible use of everyone's time.
- If possible, members notify the leader of an anticipated absence as early as possible and then take the initiative to obtain missed information. Meeting minutes or audio recordings are available from the chairs or Coordinating Center.

## Research Ethics

- Anyone requesting to use data from a workgroup must notify all members in writing of their plans.
- Data cannot be shared with individuals or organizations beyond those clearly stated in the original IRB application. With appropriate IRB approval, shared data must be de-identified and all efforts made to ensure that identities cannot be uncovered from other data provided. Further, data sharing must be consistent and compliant with any applicable data use agreements and/or data management plans.
- Exercise ethical behavior in all areas of the research process. Research misconduct is not permitted in any capacity.

## Authorship

- At least one person from each participating center involved in the workgroup should be invited to serve as an author on research products.
- Authors should meet **all four** criteria from the International Committee of Medical Journal Editors (ICMJE):
  - Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
  - Drafting the work or revising it critically for important intellectual content; AND
  - Final approval of the version to be published; AND
  - Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.
- Contributors who meet fewer than all four criteria for authorship should not be listed as authors. They are included in the acknowledgements (with their permission).
- To utilize CPCRN expertise and to further develop CPCRN collaboration, CPCRN investigators will consider and/or recommend network members for external committees (e.g. ACS Guideline Committee) and collaborative authorship opportunities such as books and reports.

## Conflict Resolution

- If a conflict occurs within or across workgroups, individual(s) involved will transparently discuss the conflict within the workgroup.
- If the conflict cannot be resolved within the workgroup, the Steering Committee Co-Chairs and Coordinating Center are consulted.
- For conflicts that remain unresolved, the conflict will be discussed during a full Steering Committee meeting. All individuals involved in the dispute will have the opportunity to present to the Steering Committee, which will discuss and ultimately arbitrate the dispute.
- Given that the Steering Committee felt that such disputes would be rare, they opted for this approach over establishing a formal *Publications and Presentations Committee*.

**Funding Acknowledgment Policy**

Communications produced under a CDC cooperative agreement must bear an acknowledgment and disclaimer. This requirement applies to PRC Core and Special Interest Projects awards including CPCRN ([General Terms and Conditions document](#), rev. Feb. 2020). When issuing statements, press releases, publications, requests for proposal, bid solicitations and other documents --such as tool-kits, resource guides, websites, and presentations (hereafter “statements”)--describing the projects or programs funded in whole or in part with U.S. Department of Health and Human Services (HHS) federal funds, the recipient must clearly state:

1. the percentage and dollar amount of the total costs of the program or project funded with federal money;
2. the percentage and dollar amount of the total costs of the project or program funded by non-governmental sources.

When issuing statements resulting from activities supported by HHS financial assistance, the recipient entity must include an acknowledgement of federal assistance using one of the following or a similar statement:

**If the HHS Grant or Cooperative Agreement is NOT funded with other non-governmental sources:**  
This [project/publication/program/website, etc.] [is/was] supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

**The HHS Grant or Cooperative Agreement IS partially funded with other non-governmental sources:**  
This [project/publication/program/website, etc.] [is/was] supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with XX percentage funded by CDC/HHS and \$XX amount and XX percentage funded by non-government source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

**Acknowledgment**

- a. If there are multiple CPCRN centers involved in the research product, the cooperative agreement number for each member center should be listed.
- b. Furthermore, the main title slide of all CPCRN presentations and homepage of all CPCRN websites must include the above statement AND must include the PRC logo.
- c. For research products from CPCRN4 or earlier, NCI must also be included in the statement above.



**Cooperative Agreement Numbers (2019-2024)**

CPCRN Center	Cooperative Agreement #
Colorado School of Public Health	U48 DP006399
Emory University	U48 DP006377
New York University School of Medicine - CUNY	U48 DP006396
University of Arizona	U48 DP006413
University of Iowa	U48 DP006389
University of North Carolina at Chapel Hill	U48 DP006400
University of South Carolina	U48 DP006401
University of Washington	U48 DP006398

## **CDC Publications Clearance Policy**

All publishable products with CDC staff listed among the authors must receive formal clearance from the agency before publishing. This includes *employees of CDC*, but does not include employees of other universities/CPCRN Network Centers that receive CDC funding. Clearance is to be coordinated by the first-listed CDC author. The CDC clearance process must happen *after* a final draft is ready, but *before* the draft is submitted to the publishers for review. When preparing a publication for submission to publishers, authors should leave ample time (at least 4-6 weeks) in between completion of the document and submission to publishers to allow for CDC clearance. Products requiring formal clearance include, but are not limited to manuscripts, journal articles, book chapters, abstracts for meetings, and website content. Co-authors from NCI or other federal agencies may have separate clearance policies that need to be followed.

## **CPCRN Communications Plan**

The broad goal of the communications plan is to build awareness of the dissemination and implementation research being conducted by CPCRN, such that we are recognized as being a national leader in this area. The Coordinating Center will disseminate CPCRN research and information through the following communications channels:

1. **Scientific publications and presentations**, including trainings for national, state, and local partners.
2. **CPCRN website**, [www.CPCRN.org](http://www.CPCRN.org)  
The website describes in detail the Network's mission and vision, Collaborating Centers, and Workgroups. It also will feature:
  - a. Recent news - The Coordinating Center will add all news items sent from network members.
  - b. Presentations about CPCRN work given at conferences
  - c. Boolean searchable database of CPCRN publications (with abstracts and PubMed links)
  - d. Training curriculum files for the Network's Putting Public Health Evidence into Action curriculum
  - e. Interactive application allowing users to visually explore connections between various Network members and their areas of expertise
  - f. "Meet our Experts" feature that allows users to identify CPCRN members to contact for scientific consultation with filters for expertise and location.
3. **CPCRN newsletter**  
The newsletter is distributed quarterly to network members, Funders, partners, and outside audiences. The newsletter is published around the 15<sup>th</sup> of February, May, August, and November. It includes details about CPCRN presentations at upcoming conferences and dissemination of CPCRN reports, publications, awards, events, and investigator updates, as well as funding announcements and job postings. Network members are encouraged to submit news items for the newsletter to the Coordinating Center at any time. Additionally, before the newsletter is published, the Coordinating Center will solicit additional news items and set a deadline for submissions (typically two weeks before publication).
4. **Social media**  
CPCRN's primary social media channel is Twitter ([@CPCRNCancer](https://twitter.com/CPCRNCancer)). All network members are encouraged to follow CPCRN and share CPCRN tweets so that CPCRN research and information will be disseminated widely. The Coordinating Center will also use Facebook ([@CPCRN](https://www.facebook.com/CPCRN)) when appropriate.
5. **CPCRN listserv**  
The CPCRN listserv includes email addresses for all CPCRN members listed in the CPCRN directory. Any CPCRN member may distribute CPCRN-relevant information to the network by sending an email to the listserv at [cpcrn@listserv.unc.edu](mailto:cpcrn@listserv.unc.edu).

### **Affiliate Member Policy**

Approved by the Steering Committee, November 2019

This policy establishes procedures and expectations for individuals who are not part of funded CPCR centers to participate in CPCR as affiliate members. Members may include, but are not limited to, faculty members, researchers, or community partners.

#### Eligibility for Affiliate Membership

To be eligible for Affiliate membership, individuals must have interest in and capability to contribute to the mission and goals of the CPCR. Affiliate members are expected to provide expertise that extends or broadens the ongoing work of the network. Affiliate members agree to represent themselves and not their institutions. Applicants must not have conflicts of interest.

#### Procedure for Becoming an Affiliate Member

*Individuals* seeking to become affiliate members must:

- Identify a current CPCR Collaborating or Coordinating Center member who will serve as a sponsor.
- Download and complete the application form (Appendix F).
- Send the completed application form and a CV to the sponsor.
- The sponsor will add a brief paragraph describing what the affiliate applicant will contribute to the network.
- The sponsor submits the application to the Coordinating Center for referral to the Steering Committee.
- The Steering Committee reviews the application and determines if the affiliate membership will be approved.

#### Expectations of Affiliate Members

Affiliate Members are expected to participate actively in the work of the network. The specific role and contribution of the affiliate member will vary based on his or her interest and expertise and network needs. At a minimum, affiliate members must attend two or more workgroup calls or meetings per year and engage in at least one workgroup project or activity.

#### Benefits of Affiliate Membership

Affiliate members collaborate with a wide range of researchers in the cancer control research community. Affiliate members are listed in the CPCR directory and are subscribed to CPCR workgroup and network communications. Affiliate members participate in or co-lead efforts to:

- Conduct research
- Develop manuscripts, presentations, tools, or products
- Develop grant applications

Affiliate members do not become eligible to receive Special Interest Project funding from CDC; however, new funding opportunities may emerge as a result of an affiliate member's involvement with CPCR. Workgroups are encouraged to delineate the roles and responsibilities of Affiliate Members in the initial stages of research, projects, manuscripts, grant applications and other activities. Data use agreements, if appropriate, should describe Affiliate members' access to and use of data originating from workgroup research.





### Support for Affiliate Members

The Coordinating Center has some funds available to support affiliate members' participation in workgroups and other network activities. For example, the Coordinating Center has previously provided research incentive funds and travel funds for Affiliate members.

### Removal and Reinstatement of Affiliate Membership

Affiliate members that do not meet minimum participation requirements will be deemed inactive and removed from network communications and activities. With a commitment to actively participate, membership can be re-established.

**Appendix A**  
**CPCRN Strategic Plan – updated March 2018**

***This document will be used to guide the network going forward and to reflect on past network activities.***

**CPCRN Mission Statement:** *Accelerate the adoption and implementation of evidence-based cancer prevention and control strategies in communities, enhance large-scale efforts to reach underserved populations and reduce their burden of cancer, deepen our understanding of the predictable processes that achieve those goals, and develop the D&I workforce in cancer prevention and control.*

**CPCRN Vision Statement:** *Community-based agencies and organizations successfully implement cancer prevention and control strategies that are effective in reducing cancer disparities.*

<b>CPCRN aspires to...</b>  <b><i>(Goals--Our timeliness aspirations, pursued continuously through different objectives)</i></b>	<b>We achieve these goals by:</b>  <b><i>(Objectives--What are the SMARTER targets for which we will aim? Specific, Measurable, Achievable, Resourced, Timelined, Evaluated, Reported)</i></b>	<b>We address these objectives by:</b>  <b><i>(Tactics--Specific actions that address how we will achieve our objectives)</i></b>	<b>We evaluate our success by:</b>  <b><i>(Key Performance Indicators--PROCESS, IMPACT, PRODUCTS)</i></b>
<p>1. Advance the science of dissemination and implementation (D&amp;I) of evidence-based cancer prevention and control (CPC) strategies, especially in underserved populations, in order to:</p>	<p>1.1 Conduct cross-center collaborative projects with broad CPCRN investigator engagement focused on:</p> <ul style="list-style-type: none"> <li>• evaluating the implementation of existing CPC strategies in varying settings (e.g. FQHCs)</li> <li>• developing, testing, and implementing new evidence-based interventions</li> </ul> <p>1.2 Each CPCRN workgroup, project &amp; collaborating center will contribute multiple products including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Presentations at national and local conferences</li> <li>• Publications</li> <li>• One or more collaborative grant submissions</li> <li>• Toolkits</li> <li>• Training materials</li> </ul>	<p>a. Workgroups, projects, and centers will achieve research objectives through community-engaged research involving methods and strategies such as:</p> <ul style="list-style-type: none"> <li>○ capacity building</li> <li>○ simulation modeling</li> <li>○ community engagement</li> <li>○ communication/dissemination</li> <li>○ evaluation</li> <li>○ non-clinical/clinical linkages</li> <li>○ development and evaluation of D&amp;I measures</li> <li>○ intervention development</li> <li>○ training and evaluation</li> <li>○ survey development</li> </ul> <p>b. Workgroup and project teams will meet regularly (based upon current activities/need) to advance their work</p> <p>c. Steering Committee meetings will be held monthly to facilitate potential cross-center collaborations and provide updates on existing workgroups and projects.</p>	<p><i>Process</i> – Extent of cross-center collaborations in workgroups and projects (including but not limited to number of cross-center meetings and related events); Progress towards collaborative and center-specific products (e.g., manuscript, abstract, and grant submissions)</p> <p><i>Impact</i> – Evidence of scientific community leadership by CPCRN investigators in developing D&amp;I science (around CPC or more generally)</p> <p><i>Products</i> – Number of collaborative and center-specific research activities, including, but not limited to, accepted presentations, publications, and grants funded, demonstrating network collaboration and center-specific productivity</p>

CPCRN aspires to...	We achieve these goals by:	We address these objectives by:	We evaluate our success by:
		<p>d. The Coordinating Center will inform network members of funding opportunities and organize interest meetings about these opportunities</p>	
<p>a. Accelerate the adoption of evidence-based intervention (EBI) strategies in communities</p>	<p>1.3 Develop and sustain engaged relationships with community partners, particularly those engaged with underserved populations.</p> <p>1.4 Conduct and publish at least one scoping / systematic review or commentary related to EBI adoption, where relevant and appropriate to workgroup activities.</p>	<p>e. Workgroups, projects, and centers will address research questions through community-engaged research involving partners such as:</p> <ul style="list-style-type: none"> <li>○ FQHCs/community health centers</li> <li>○ rural clinics</li> <li>○ Medicaid CCOs/PCMHs</li> <li>○ worksites</li> <li>○ CBOs/coalitions</li> <li>○ retail settings</li> <li>○ schools</li> <li>○ health departments</li> <li>○ faith-based settings</li> <li>○ pharmacies</li> <li>○ American Cancer Society</li> <li>○ primary care associations</li> <li>○ statewide cancer alliances</li> </ul> <p>f. Workgroups, projects, and centers will utilize social media, web, print, and/or news coverage to disseminate their work beyond academic audiences.</p>	<p><i>Process</i> – Conduct of systematic and scoping reviews to synthesize evidence; Formation of community partnerships; Formative research to translate EBIs to address communities’ needs/preferences; Testing strategies to disseminate EBIs; Testing implementation strategies to disseminate EBIs; Marketing and audience research to understand channels to disseminate network products</p> <p><i>Impact</i> – number of community partners aware of EBIs, their attitude toward EBIs, and demonstrated adoption of EBIs</p> <p><i>Products</i> – Translation of D&amp;I evidence into products such as toolkits to help community organizations with D&amp;I process; Scientific presentations, peer reviewed publications, and grants to disseminate and test strategies that are shown to accelerate adoption of EBIs; Dissemination of network products through diverse media and web channels</p>

CPCRN aspires to...	We achieve these goals by:	We address these objectives by:	We evaluate our success by:
<p>b. Enhance large-scale, evidence-based strategies to reduce the burden of cancer</p>	<p>1.5 Bring substantive expertise to the work of national and state government, non-profit organizations, agencies and coalitions (e.g., Roundtables), and other stakeholder audiences.</p> <p>1.6 Serve on the board or advisory/steering committee of an organization or coalition whose work relates to CPCRN, when applicable</p> <p>1.7 Collaborate with community partners, practitioners, or organizations on scientific presentations and/or publications, when applicable</p> <p>1.8 The Coordinating Center will facilitate increased visibility of the network's contributions and expertise within academic and non-academic channels.</p>	<p>g. Workgroups, projects, and centers will focus on evidence-based cancer prevention and control strategies in content areas such as:</p> <ul style="list-style-type: none"> <li>o colorectal cancer screening</li> <li>o cervical cancer screening</li> <li>o prostate cancer screening</li> <li>o HPV vaccination</li> <li>o tobacco and lung cancer control</li> <li>o physical activity</li> <li>o survivorship</li> <li>o healthy eating</li> <li>o rural health</li> </ul> <p>h. Network investigators will serve as subject matter experts for national and state government, non-profit organizations, agencies and coalitions (e.g., Roundtables, state cancer coalitions), and other stakeholder audiences</p> <p>i. The Coordinating Center will develop a media strategy to promote the network actively</p> <p>j. Workgroups, projects, and centers will catalyze action through:</p> <ul style="list-style-type: none"> <li>o technology creating</li> <li>o unfunded pilot research</li> <li>o work with advocacy groups/NGOs</li> <li>o congressional hearings</li> <li>o presentations to policymakers</li> <li>o new partnership development</li> <li>o prompting changes to office/point of care practices</li> </ul>	<p><i>Process</i> – Engagement and partnership with federal and state health agencies, health systems, coalitions, and organizations with broad reach in underserved populations</p> <p><i>Impact</i> – Leadership and other engagement with local, regional, state, and national cancer coalitions and organizations via Roundtables and other efforts; Implementation of state plan and other reports' goals/objectives; Active work with agencies and organizations utilizing investigator expertise to achieve measurable objectives and/or contribute to those organizations' projects; Media attention for network activities and products</p> <p><i>Products</i> – Contributions to state cancer plans and other relevant reports; Receipt of collaborative and community-engaged grant funding to continue/expand scaling efforts of cancer-related EBIs; Joint authorship with community partners on scientific presentations and/or publications; Press releases to disseminate to media about network products; Policy or data briefs to disseminate network findings to diverse stakeholder audiences; Presentations to policymakers and other decision making entities</p>

CPCRn aspires to...	We achieve these goals by:	We address these objectives by:	We evaluate our success by:
<p>c. Enhance practice-level or organizational-level capacity to conduct D&amp;I of EBIs</p>	<p>1.9 Develop, implement, and disseminate high quality training experiences and materials to relevant organizations</p>	<p>k. Network members will update the Putting Public Evidence into Action Curriculum regularly.</p> <p>l. Centers will implement <i>train the trainer</i> programs for the Putting Public Health Evidence into Action curriculum.</p> <p>m. Members will conduct training workshops at national conferences.</p>	<p><i>Process</i> – Deliver and test training, technical assistance, and other implementation strategies for practice organizations and individual practitioners</p> <p><i>Impact</i> – Self-efficacy and quality and quantity of EBI implementation within practices and by practitioners, identifying characteristics of successful implementation efforts</p> <p><i>Products</i> – Future versions of CPCRn Putting Public Health Evidence into Practice – in various formats; Other new training curricula and media; Collaborative and center-scientific presentations and peer reviewed publications and grants reflecting practice-level or organization-level implementation of EBIs</p>
<p>2. Develop and sustain the research workforce contributing to D&amp;I science in CPC</p>	<p>2.1 Engage junior faculty, post-doctoral fellows, and students in the work of the network</p> <p>2.2 Build a social and professional community of CPC-focused D&amp;I researchers</p> <p>2.3 Attend and present at relevant D&amp;I meetings</p>	<p>a. Senior investigators will mentor junior faculty, post-doctoral fellows, and students.</p> <p>b. Centers will provide funding support to junior faculty, post-doctoral fellows, and students</p> <p>c. Centers will provide travel funds for junior faculty, post-doctoral fellows, and students to attend the CPCRn annual meeting and/or other national conferences</p>	<p><i>Process</i> – Dissemination and organizing/hosting of D&amp;I funding and training and social/professional networking opportunities to network-affiliated researchers at all levels; Involvement of network-affiliated investigators in D&amp;I and/or cancer-focused training opportunities, fellowships, and relevant leadership and outreach positions; Inclusion of students and post-docs in all (or as many as is feasible) center, workgroup, and project activities</p>

CPCRN aspires to...	We achieve these goals by:	We address these objectives by:	We evaluate our success by:
		<p>d. The Coordinating Center will organize and fund regular social and professional engagement opportunities for network members throughout the year.</p>	<p><i>Impact</i> – Career advancement/progress of network-affiliated investigators</p> <p><i>Products</i> – Inclusion of junior investigators, practitioners, postdocs, and/or students in academic products of network activities (e.g., publications, grants, presentations); Inclusion of junior investigators, practitioners, postdocs, and/or students in network meetings and other professional opportunities.</p>

## Appendix B

### CDC Science Impact Framework – Examples of Key Indicators

Degree of Impact	Potential Measurable Indicators
Disseminating Science	<ul style="list-style-type: none"> <li><input type="checkbox"/> Scientific publications (open access journals)</li> <li><input type="checkbox"/> Trade publications</li> <li><input type="checkbox"/> Professional meetings/conferences</li> <li><input type="checkbox"/> General communication (social media, web, print)</li> <li><input type="checkbox"/> Presentations</li> <li><input type="checkbox"/> Training, coursework</li> <li><input type="checkbox"/> Other scientific output (e.g., CDC Public Health Grand Rounds, Vital Signs, Science Clips)</li> </ul>
Creating Awareness	<ul style="list-style-type: none"> <li><input type="checkbox"/> Continuing Education (CME, CEU)</li> <li><input type="checkbox"/> Awards</li> <li><input type="checkbox"/> Stakeholder resources, curriculum, training</li> <li><input type="checkbox"/> Feedback (Survey, focus groups, anecdote)</li> <li><input type="checkbox"/> Information sharing and communications among professional societies</li> <li><input type="checkbox"/> Electronic communications (information shared on listservs and other electronic resources, social media, news coverage)</li> <li><input type="checkbox"/> Queries</li> <li><input type="checkbox"/> Requests to contribute to efforts that further the science output</li> </ul>
Catalyzing Action	<ul style="list-style-type: none"> <li><input type="checkbox"/> Technology creation</li> <li><input type="checkbox"/> New funding (pilots/research)</li> <li><input type="checkbox"/> Advocacy groups/NGOs</li> <li><input type="checkbox"/> Congressional hearings</li> <li><input type="checkbox"/> Partnerships and collaborations</li> <li><input type="checkbox"/> Research &amp; Development</li> <li><input type="checkbox"/> Office practice/point of care changes</li> </ul>
Effecting Change	<ul style="list-style-type: none"> <li><input type="checkbox"/> Building public health capacity (e.g., workforce development, funded research, improved staff competency)</li> <li><input type="checkbox"/> Creation of registries/surveillance</li> <li><input type="checkbox"/> Legal/policy changes</li> <li><input type="checkbox"/> Accreditation</li> <li><input type="checkbox"/> Cultural/social change</li> <li><input type="checkbox"/> Behavioral change</li> <li><input type="checkbox"/> Economic change               <ul style="list-style-type: none"> <li><input type="checkbox"/> CMS reimbursement</li> <li><input type="checkbox"/> Other payer actions</li> </ul> </li> <li><input type="checkbox"/> Change instilled               <ul style="list-style-type: none"> <li><input type="checkbox"/> (New) formal guidelines and recommendations (e.g., WHO)</li> <li><input type="checkbox"/> Hospital standards</li> </ul> </li> <li><input type="checkbox"/> Funding</li> <li><input type="checkbox"/> Anecdotes/case studies</li> <li><input type="checkbox"/> Sustainable and scalable science translation</li> </ul>
Shaping the Future	<ul style="list-style-type: none"> <li><input type="checkbox"/> New hypotheses/Continuous Quality Improvement</li> <li><input type="checkbox"/> Implementation of public health programs/initiatives</li> <li><input type="checkbox"/> Health outcomes**               <ul style="list-style-type: none"> <li><input type="checkbox"/> Prevalence and incidence</li> <li><input type="checkbox"/> Morbidity and mortality (e.g., frequency of outbreaks, trends)</li> <li><input type="checkbox"/> Life expectancy</li> <li><input type="checkbox"/> Quality of Life improvements</li> </ul> </li> <li><input type="checkbox"/> Reductions in economic burden</li> </ul>

\*The degree of impact is not necessarily a progression; therefore, events captured may not be reflected at every domain

\*\* Health outcomes is the ultimate goal - driven by the 5 domains of impact

**Appendix C Workgroup Progress Report**

CPCRN Workgroups are required to submit a narrative report each reporting period. The report should be 2-3 pages in length and should address the following. Please insert your responses in the boxes provided, expanding as needed. Do not alter the report's formatting (fonts and margins), as these will be combined into a master report for the funders. Feel free to include photos and figures as desired, and/or to delete red instructions. **And of course, change your workgroup name and the date above.**

The funders are not looking for substantial background information about your research in this report, they are most interested in what has been done since your last report, and how you are keeping things moving forward with things like IRBs, study recruitment, and publications & presentations, and in learning about ways your work has had impact.

Please list **Workgroup Co-Chairs** and their Center Affiliations.

Please list the **staff, investigators, Network Centers, and collaborating organizations** that have been **substantially involved** in your Workgroup's work during the reporting period.  
 (You may add rows to this table as needed)

Center/ Organization	Investigator/ Staff Name	Workgroup Activity	Role/ Contribution

Please list the **number of workgroup meetings** during the reporting period.

**Phone meetings:**  
**Face to face at CPCRN meetings:**  
**Face to face outside of CPCRN meetings:**

Please provide a **summary of your CPCRN Workgroup's accomplishments/research findings/progress/work completed** during the funding period.



What is your **plan of work** for the next reporting period?

Please list *all* **Publications** by your workgroup in this reporting period (published or in-press only).

Please list *all* **Grant Applications** (and their funding status) by your workgroup in this reporting period.

**Appendix D**

**CPCR**N Workgroup Formation  
1-Page Concept Paper

**Proposed Workgroup Topic:**

**Potential Lead Investigator(s):**

**Brief Rationale:**

**Preliminary Planned Activities:**

**General Timeline:**

**Estimated Resources Needed:**

## Appendix E

### CPCRN Workgroup Charter

*When a workgroup concept is ready to move forward as a CPCRN workgroup, workgroup members will collaboratively develop a workgroup charter to guide their work using the template below. This document will be shared with the Steering Committee at least one week before the meeting where the workgroup will be considered for approval and presented to the Steering Committee by the proposed Chairs or Co-Chairs.*

**1. Workgroup Name**

**2. Overall Objective**

**3. Key Members**

Chairs/Co-Chairs	[names]
Workgroup project director(s)	[names]
Workgroup members	[names]
External stakeholders	[names]

**4. Roles and Responsibilities**

[What are the expectations for each member? How frequently will the group meet?]

**5. Background**

[Why is the project being undertaken? What gap in knowledge does the project address?]

**6. Scope, Deliverables and Timeline**

[What will be the end result or deliverables of the project? Describe what phases of work will be undertaken. It may be important to mention what activities will not be included in this project. Identify the project timeline and milestones.]

**7. Resources Needed**

[Describe the time and funds to be contributed by workgroup members and collaborating centers. If there are any “asks” of the coordinating center, describe those as well. *Remember that collaborating centers are expected to dedicate at least 50% of their funding to collaborative workgroup projects, including project management/direction where needed*]

**8. Communications Plan**

[How and when will information be communicated to and from workgroup members?]

**Appendix F**

**AFFILIATE MEMBER APPLICATION FORM**

*Updated November 2019*

---

Please refer to the Affiliate Member Policy to determine your eligibility: <https://cpcrn.org/member-resources?open=policies>

Affiliate Member Name: [Click here to enter text.](#)

Affiliate Member Organization: [Click here to enter text.](#)

Degrees: [Click here to enter text.](#)

How are you affiliated? (choose one):  Community Partner  Co-Investigator  Other

Email: [Click here to enter text.](#)

Phone: [Click here to enter text.](#)

Full work address: [Click here to enter text.](#)

Nominating CPCRN sponsor name: [Click here to enter text.](#)

Nominating CPCRN sponsor's center: [Click here to enter text.](#)

Workgroup name (*optional*): [Click here to enter text.](#)

Affiliate member's area(s) of expertise (affiliate applicant completes):

[Click here to enter text.](#)

Affiliate member's expected role or contribution (affiliate applicant completes):

[Click here to enter text.](#)

Endorsement comments from sponsor (what the applicant brings to the network).

[Click here to enter text.](#)

*Sponsor emails this form and applicant's CV to the Coordinating Center at [beckylee@unc.edu](mailto:beckylee@unc.edu). The application will be reviewed by the Steering Committee.*