

# Pathways to Prevention:

Weighing the evidence. Identifying the research gaps. Determining next steps.

## ***National Institutes of Health Pathways to Prevention IC Coordinator Responsibilities***

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*To ensure the effectiveness of the Pathways to Prevention (P2P) workshop, the sponsoring National Institutes of Health (NIH) Institute or Center (IC), or Office within the NIH Office of the Director, designates an IC Coordinator who is responsible for defining the scope of the workshop and initiating the workshop planning process. The IC Coordinator works closely with the Office of Disease Prevention (ODP) P2P Coordinator to ensure that the goals of the workshop are met. Any concerns related to workshop activities should be conveyed to the ODP P2P Coordinator in the NIH ODP.*

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### **The IC Coordinator's responsibilities and time commitments:**

#### **WORKSHOP PROPOSAL**

- Lead the development of a P2P workshop proposal and submit the proposal to the ODP P2P Coordinator.
- Ensure that the proposal includes a description of the scientific topic to be addressed, how the topic is related to disease prevention, and a set of preliminary workshop questions.
- Obtain the IC Director's written approval for the P2P workshop and submit letter of support to the ODP P2P Coordinator.
- Recruit co-sponsors from NIH ICs, Offices, working groups, other federal agencies, or federal working groups.

#### **PLANNING ACTIVITIES**

- Collaborate with the ODP P2P Coordinator to:
  - Identify and invite participants from federal agencies for the organizational meeting.
  - Develop an agenda for the organizational meeting.

#### **ORGANIZATIONAL MEETING**

- Co-chair the workshop organizational meeting with the ODP P2P Coordinator.
- Collaborate with meeting attendees to decide:
  - If the format is suitable for the topic
  - If the timing is right for a P2P workshop on the topic
  - If the scope of the preliminary workshop questions is appropriate.
- Lead the discussion on developing a list of nominations for the Panel Chair and Working Group members.
- ***The organizational meeting requires 2–3 hours.***

#### **WORKING GROUP MEETING**

- Chair the Working Group meeting.
- Collaborate with the Working Group to:
  - Finalize the workshop questions.
  - Finalize the workshop agenda.
  - Select the workshop date.
- Lead the discussion on developing a list of panelist and speaker nominations.
- ***The Working Group meeting requires 1 full day and 1 half day.***

## THE WORKSHOP

- Invite the IC Director to give the opening presentation during the workshop. If the IC Director is unavailable, a representative from the sponsoring IC may give the opening talk.
- **Attend the full 2 days of the workshop.**

## POST-WORKSHOP ACTIVITIES

- Approximately 8 months following the workshop, collaborate with the ODP P2P Coordinator to organize a federal partners meeting to discuss action items gleaned from the panel's final report.

## P2P WORKSHOP PARTICIPANT ROLES

- *NIH Office of Disease Prevention (ODP):* The NIH ODP provides the leadership, infrastructure, funding, and coordination necessary to conduct P2P workshops. The P2P Coordinator is based within the NIH ODP.
- *Organizational Meeting Attendees:* Federal employees representing the relevant federal agencies and programs as well as representatives from across the NIH and the Agency for Healthcare Research and Quality (AHRQ) will be in attendance. These participants decide:
  - If the format is suitable for the topic
  - If the timing is right for a P2P workshop on the topic
  - If the scope of the preliminary workshop questions is appropriate.

- *Working Group:* Working Group members are nominated by the participants in the organizational meeting and sponsoring NIH ICs or Offices. They are content area experts from the federal government, academia, and clinical practice. They finalize the agenda and workshop questions, nominate speakers and panelists, select the workshop date, and are engaged in the workshop process from beginning to end.
- *AHRQ Evidence-based Practice Center (EPC):* After the questions have been finalized by the Working Group, an AHRQ EPC prepares and provides the evidence report to the speakers and panel members approximately 6 weeks prior to the workshop.
- *Panel:* The panel is an unbiased, independent group composed of 8-10 members that gives balanced, objective, and informed attention to the topic. The panel members must have no vested financial or intellectual interest in the topic under review.
- *Panel Chair:* The Panel Chair is an expert who is knowledgeable in the field of medical science under consideration but is neither identified with an advocacy position regarding the workshop topic nor with research that may be presented to answer any of the workshop questions.
- *Speakers:* P2P workshop speakers are experts in the topic who have published on the issue, have conducted research on the issue, and may have strong opinions or beliefs on the topic. These experts present information that directly addresses workshop questions.