At the Intersection of Health, Health Care and Policy

Cite this article as:
N Adelman, L Chester and K Slack
The HSRProj database: update on Health Services Research in Progress
Health Affairs 19, no.4 (2000):257-258
doi: 10.1377/hlthaff.19.4.257

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Special Report

The HSRProj Database: Update On Health Services Research In Progress

This database of studies funded by foundations and federal/state agencies is a useful tool for health services researchers and facilitates communication among them.

by Naomi Adelman, Lois Chester, and Kathy Slack

The database HSRProj, featuring more than 5,700 detailed descriptions of current and recently completed health services research projects from more than eighty funders, is a joint effort of the Association for Health Services Research (AHSR), the National Library of Medicine (NLM), and the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill (UNC).

Background. HSRProj derives from earlier efforts to enhance information resources for health services researchers and for those in the related field of health care technology assessment. The development of a grants information system had been a goal of the AHSR ever since its founding in 1981. In response to demand for information on health services research, the Foundation for Health Services Research (FHSR), which was the educational and professional arm of the AHSR, developed a directory of health services research organizations in 1983. This publication and its subsequent editions (the last of which was published in 1988) were not comprehensive, had limited subject indexes, and did not contain substantive information on the research projects funded by these organizations. It became apparent that the project information would be more useful if it were computerized for easy access and updating.

In 1991 the Baxter Foundation provided funding to the FHSR to begin preliminary work on an information system for ongoing health services research. The Baxter Health Policy Review, Improving Health Policy and Management: Nine Critical Issues for the 1990s, published by the FHSR in 1992, included a listing of current research relevant to each of its chapters. This was the first attempt to identify ongoing research related to a particular health services research topic and provide contact information for the persons doing the research.

Also in 1991, with funding from the Pew Charitable Trusts, the FHSR began a collaboration with the Sheps Center to develop, test, and refine a health services research project database and retrieval system that ultimately would become one of the NLM’s databases.

During this same time period Congress passed legislation (P.L. 101-239) in 1989 creating the Agency for Health Care Policy and Research (now called the Agency for Healthcare Research and Quality). Also within this legislation, the NLM received a mandate to develop and enhance its information services in health care technologies and technology assessment. The NLM then established the Of...
lice of Health Services Research Information (OHSRI) in 1990. The NLM received a legislative mandate in the 1993 NIH Revitalization Act to create a new National Information Center on Health Services Research and Health Care Technology (NICHSR) as a focal point for improving “the collection, storage, analysis, retrieval and dissemination of information on health services research, clinical practice guidelines and on health care technology, including the assessment of such technology.”

The NICHSR joined the collaboration between the AHSR and the Sheps Center, and in 1994 the fully developed database (HSRProj) was mounted on the NLM mainframe computer. At that time the database contained 1,569 records from nine federal agencies and seven private foundations. More than twenty foundations are represented in the more than 5,700 records in HSRProj today. Since 1995 HSRProj has been available through Grateful Med and is now online at http://igm.nlm.nih.gov. It is overseen by the NICHSR.

**Special features.** HSRProj attempts to capture the universe of current, cutting-edge health services research. As a database, it is unique in scope of coverage and purpose. Its objective is to identify the broadest range of funders of health services research—from large government agencies to small private foundations—and encourage them to provide the most complete information about their funded projects. At present, the foundations with the most projects in HSRProj are the Commonwealth Fund, the Robert Wood Johnson Foundation, and the Henry J. Kaiser Family Foundation. Project information is translated into a standardized record format that can be searched by title, sponsoring agency, performing agency, investigator, and subject. (Amounts of grants are not listed.) More than 2,300 searches are conducted each month. NLM professionals index the records using terms from their standardized vocabulary of medical subject headings (MeSH), which are familiar to users of the NLM’s other databases, including MEDLINE. HSRProj is updated quarterly.

Some of the major subject areas represented in HSRProj are the delivery, facilities, personnel, services, financing, and quality of health care. Users can learn which government agencies and private foundations are funding health services research as well as contact information for researchers.

A unique aspect of the HSRProj database is that it informs users about health services research projects before they appear in the published literature. Although study results are not available, data about study topics and design are presented. Thus, HSRProj can serve as a barometer for the state of the field. The filter of peer review and the long (twelve to eighteen months) publication process is valuable for screening in clinical trials, but in the more fluid areas of health services research, important information is contained in the actual research in progress. In addition, the projects in the database give an approximate indication of how research dollars are being dispersed and where resources are needed.

Another useful aspect of the database is its capacity to facilitate communication among health services researchers. It provides a tool for young researchers to find experts in the field to serve as possible mentors and encourages collaborations among researchers, rather than competition for limited resources.

The HSRProj database will be enhanced in the near future with a World Wide Web upgrade that will facilitate the uploading of new project data to make information available sooner. At present, it is not possible to search by year, but planned changes should make it easier to search for and retrieve records. Work also continues on improving the level of cooperation of the different organizations involved: A goal is to recruit broader participation and to ensure that organizations send information on a timely basis.

As the interface, content, and comprehensiveness continue to improve, HSRProj will become an increasingly valuable tool for disseminating crucial information to guide decision making in health policy.