

PRIMARY CARE TRAINING ENHANCEMENT PROGRAM

Awardee Profile: Northeast Ohio Medical University

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| Organization | Northeast Ohio Medical University Department or Division: Department of Family and Community Medicine |
| Principal Investigator | John Boltri, M.D., FAAFP jboltri@neomed.edu 330-325-6172 |
| Partners | <ul style="list-style-type: none">• MetroHealth of Cleveland |

PROJECT OVERVIEW

Trainee Group(s) and
Discipline(s) Targeted

- Medical or predoctoral students
- Residents: family medicine, internal medicine
- Faculty
- Practicing physician
- Practicing physician assistant
- Practicing nurse practitioner

Primary project objectives

- Transform health care systems by providing knowledge and skills to improve systems of care, build multidisciplinary teams, increase quality of skills, and improve work-life of providers.
- Incorporate population health to gain knowledge of strategies and interventions across the continuum of care to improve health at the lowest cost.
- Reduce disparities by increasing understanding of their causes and solutions including social, economic, political, cultural, legal, and related ethical theories.
- Develop research expertise for collaborative projects to improve access, quality of care, and cost-effectiveness.

EVALUATION OVERVIEW

Evaluator contact information

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HRSA Priority Outcomes

- Patient service provided by trainees and faculty at participating PCTE clinical training sites.
- Quality of care provided by trainees and faculty at participating PCTE clinical training sites.



EVALUATION OVERVIEW

Continued

Measures and Tools

- Assessment of value-based care competencies of faculty and residents including knowledge and attitudes
 - Assessment of trainee attitudes toward medically underserved communities, social health disparities, and the value of diversity within the health care system
 - Assessment of provider experience including health and attitudes toward work life
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ABSTRACT

As submitted with proposal

The purpose of this collaborative proposal led by NEOMED's Dept. of Family and Community Medicine is to improve the primary care workforce by enhancing inter-professional training for primary care clinicians, teachers and researchers, with specific attention to underserved populations, across the care continuum. Through this proposal, we will achieve the quadruple aim of improved healthcare quality (specifically for underserved populations), lowered costs, improved patient and family experience, and improved health care provider experience. We will achieve this goal by implementing a formal curriculum for medical students, faculty, and residents to meet four objectives:

1. transform healthcare systems by providing the knowledge and skills necessary for improving systems of care, building multidisciplinary teams, increasing quality of skills, and improving the work-life of healthcare providers;
2. incorporate population health to gain knowledge of strategies and interventions across the continuum of care to improve health at the lowest cost;
3. reduce disparities by increasing understanding of the causes of disparities and solutions to them, including social, economic, political, cultural, legal and ethical theories related to health disparities; and
4. develop research expertise to develop collaborative projects to improve access, quality of care, and cost-effectiveness.

This collaborative program engages family medicine, general internal medicine, pediatric and behavioral health departments from one medical school, nine residency programs, and two federally qualified health centers. Metro Health Services of Cleveland (MHS) will provide training and mentoring in adapting their HRSA-funded PCTE program. We will provide interdisciplinary training to faculty physicians from each residency program and FQHC, with other care team members from each site including NPs, PAs and behavioral health specialists. The goal of this train the trainer model is for each of the training sites to have a minimum of three care team faculty complete the program, with one master trainer in each of the following three areas: transforming health systems, population health management, and reducing health disparities. The faculty experts at their site will champion the work, and train residents and other faculty.

Working with the Associate Dean of Curriculum, faculty in Internal and Family Medicine will integrate this curriculum through four years of medical school. We will conduct a comprehensive evaluation of the recruitment, education, and retention efforts. We will collect data from assessments of the training, institutionalization of the curricula and connection to existing networks that are conducting community-based research on underserved populations. The evaluation will take place via web-based survey software and through focus groups. Stakeholders will complete pre and post surveys of their training on the first and last day of the curriculum and will participate in focus groups and interviews outside of structured class times for the other scheduled assessments.