

# PRIMARY CARE TRAINING ENHANCEMENT PROGRAM

## *Awardee Profile: University of New England*

Organization	<b>University of New England</b> Department or Division: Center for Excellence in Health Innovation
Principal Investigator	<b>Dora Anne Mills, M.D., M.P.H., FAAP</b> dmills2@une.edu 207-221-4621
Partners	<ul style="list-style-type: none"><li>• Penobscot Community Health Care (PCHC)</li></ul>

### PROJECT OVERVIEW

Trainee Group(s) and Discipline(s) Targeted

- Advanced degree students: physician assistant, nurse practitioner, pharmacy, dental medicine, and other advanced practice students
- Medical or predoctoral students
- Practicing physicians: primary care
- Practicing physician assistants
- Practicing nurse practitioners
- Practicing pharmacists
- Practicing dentists

Primary project objectives

- Provide 25 UNE physician assistant (PA) students and 160 UNE medical students with training in the Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD) recommended competencies, and when appropriate, alongside 70 UNE pharmacy students (together forming the PCTE Cohorts of students), in partnership with the Penobscot Community Health Care (PCHC).
- Provide 30 PCHC practicing primary care physicians, physician assistants, nurse practitioners, and/or pharmacists (PCHC clinical preceptor cohorts) with training on the ACTPCMD recommended competencies, as well as how to teach the competencies effectively to primary care health professions students.
- Implement the UNE Clinical Interprofessional Curriculum (CIPC) with UNE student teams comprising 25 UNE PA students, 160 UNE medical students, and as appropriate, 70 UNE pharmacy students (PCTE Cohorts of students), as well as clinical preceptors at PCHC.

### EVALUATION OVERVIEW

Evaluator contact information

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## EVALUATION OVERVIEW

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| HRSA Priority Outcomes | <ul style="list-style-type: none"><li>• Rate of graduates/program completers practicing in primary care, at least 1 year after program completion.</li><li>• Rate of graduates/program completers practicing in underserved areas, at least 1 year after program completion.</li><li>• Patient service provided by trainees and faculty at participating PCTE clinical training sites.</li><li>• Quality of care provided by trainees and faculty at participating PCTE clinical training sites.</li><li>• Cost of care provided by trainees and faculty at participating PCTE clinical training sites.</li></ul> |
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| Measures and Tools | <ul style="list-style-type: none"><li>• PCTE Pre- and Post-Clinical Year Assessment [knowledge, attitudes, and beliefs using Interdisciplinary Education Perceptions Scale (McFadyen, et al, 2007) and IPEC competencies (2017)<ul style="list-style-type: none"><li>• % increase (year 1 target 10%)</li></ul></li><li>• PCTE Student Checklist</li><li>• PCTE Student Learning Activities Post-Rotation Debrief</li><li>• PCTE Training Evaluations</li><li>• Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey<ul style="list-style-type: none"><li>• % increase (year 1 target 10%)</li></ul></li><li>• PCHC electronic medical record (EMR)<ul style="list-style-type: none"><li>• % of patients screened for substance use via SBIRT (year 1 target - screen 4,200 patients of 10,500 new adult patients per 2014 UDS)</li><li>• # patients visits for substance use services</li></ul></li><li>• Prescription Monitoring Program (PMP), Maine Office of Substance Abuse and Mental Health Services<ul style="list-style-type: none"><li>• # of opioid prescriptions in Penobscot County (year 2 target - 5% decrease to 31,644 (the total number of opioid prescriptions for this county stayed flat between 2011-2014)</li></ul></li><li>• Maine Shared Health Needs Assessment and Planning Process Community Health Needs Assessment 2015<ul style="list-style-type: none"><li>• % of patients with chronic pain and daily opioid use w/ functional assessment in home visit</li></ul></li><li>• Rate opiate poisoning ED visits in Penobscot County Cost/patient</li></ul> |
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## ABSTRACT

*As submitted with proposal*

The University of New England (UNE), an innovative health and sciences university rounded in the liberal arts, proposes to partner creatively with Maine's largest community health center to transform the primary care workforce in rural and underserved Maine and to improve health outcomes. UNE's College of Osteopathic Medicine (COM) is the lead applicant, and UNE's Physician Assistant (PA) Program is a collaborator. Partnering organizations include Penobscot Community Health Care and UNE's College of Pharmacy and College of Dental Medicine. Together, these partners will:

- Provide 25 UNE physician assistant (PA) students and 160 UNE medical students with training in the Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD) recommended competencies, and when appropriate, alongside 70 UNE pharmacy students (together forming the PCTE Cohorts of students), in partnership with the Penobscot Community Health Care (PCHC);

## **ABSTRACT**

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- Provide 30 PCHC practicing primary care physicians, physician assistants, nurse practitioners, and/or pharmacists (PCHC Clinical Preceptor Cohorts) at Penobscot Community Health Care (PCHC) with training on the ACTPCMD recommended competencies as well as how to teach the competencies effectively to primary care health professions students; and
- Implement the UNE Clinical Interprofessional Curriculum (CIPC) with UNE student teams comprising 25 UNE PA students, 160 UNE medical students, and as appropriate, 70 UNE pharmacy students (together as the PCTE Cohort of students), as well as clinical preceptors at Penobscot Community Health Care (PCHC).

As a result of this work, health care providers – both present and future - working in rural and underserved areas will be equipped with the tools needed for this next century to engage effectively with patients and populations to improve health