

PACER Team Report Summary East Virginia Medical School

Team Mission Statement: The EVMS PACER Program will improve population health within primary care practices through an interprofessional approach to team-based care with a focus on identifying and addressing social determinants of health.

What They Did:

Educational Transformation Accomplishments

- The medical school curriculum faculty are focusing on social determinants of health and PACER has helped to provide stimulating features to this work, how the interprofessional team should function and how to train them. Trainees include EVMS medical students and residents, with the majority of students from Old Dominion University (ODU) nursing, physical therapy, counseling and dental hygiene.
- Virtual patients and families are used to tie foundational sciences to clinical care, socioeconomic & behavioral determinants of health and health systems sciences as part of the newly developed Care Forward curriculum which began as an outgrowth of the AMA-Accelerating Change initiative.
- The Pediatrics Department received a Julius Richmond Visiting Lectureship Grant from the American Academy of Pediatrics and because of PACER, the Peds faculty who coordinates this program worked with FM and IM to identify a speaker that could give a talk focused on smoking/ tobacco cessation applicable/valuable across disciplines. They held a successful joint grand rounds that included faculty and residents from all 3 disciplines.
- The PACER faculty developed a model for interprofessional teams to assess complex needs of patients with significant socioeconomic barriers and chronic diseases that provided integrated care. This teaching model is being expanded to other clinical sites.
- Significant interprofessional faculty development in IPE and IPC are a result of the project.

Clinical Transformation Accomplishments

- Interprofessional Care Clinic (IPC) - Hot spotting team care clinic at one of their safety net clinic sites. Residents and students from multiple professions conduct a comprehensive screen for socioeconomic/ environmental/allied health-related issues to address social determinants and barriers to optimal health. IPC aims to address barriers to achieving positive health outcomes by connecting patients to resources within their communities in one appointment. Off shoots to this work include a counseling aspect at this clinic so behavioral health is now at this clinic two mornings a week.
- The IPC is being looked at as a model that can be disseminated and adapted in other teaching clinics with IP learners, e.g. geriatrics clinic, Peds clinic.
- Both MD and MPH students conduct QI projects related to the IPC for their service learning projects.
- A novel aspect of the development of the IPC was using standardized patients to pilot test the process of having multiple learners involved in the patient visit before starting to see actual patients.
- Through the development of the interprofessional and inter-institutional teaching collaborative, new collaborative projects in telehealth, integrative substance use disorder management and clinical improvement activities across at academic clinical sites have been implemented and are ongoing.
- Through a grant from the Virginia Department of Health, two nurses served as health coaches, attending the IPC and assisting with case management/ follow-up for those patients with uncontrolled hypertension.

How They Did It:

Key Elements

- Visiting other academic institutions with ongoing IPE clinical experiences was very helpful in generating ideas that fit EVMS and partner IPE and IPC needs.
- Make sure IPE in IPC settings is in sync with institutional clinical goals for quality care and outcomes.

- Core faculty team plans to keep writing grants that use the IPC model and “selling” their IPC model to other clinical groups to meet the needs of vulnerable populations.
- Interdisciplinary faculty team plans to leverage accreditation requirements as much as possible to disseminate their IP model for student IPE experiences.

Enablers

- IPE accreditation needs an important motivator
- Clinical population served is high risk for preventable healthcare utilization with low reimbursement
- HRSA training grant supporting PCMH, team-based care, and improving quality provided significant resources for PACER (staff time, conference travel)
- EVMS Summer Scholars Program provided support for 2 cohorts of students to conduct evaluation and QI projects assessing trainee attitudes and behaviors around team-based care prior to and after exposure to the clinic.
- Physical therapy students previously had very limited exposure to low income patients in their training. This clinic provided an experience for these students that they had only learned about in classes.

Barriers/challenges

- Not having enough time to do this work
- EVMS PACER team needs for expanded affiliation agreements in education, HIT infrastructure and data sharing, and meshing of different learner academic schedules.
- Funding for faculty and staff support- without HRSA grants at both EVMS and ODU we would not have been able to put together this team.
- Hierarchical structures within and outside the medical culture presented challenges to optimal student and resident team-based interaction. Physician role as the “ringmaster”, “the buck stops here”, and the one responsible for medical errors leads to an assumption by trainees that the MD should still lead the team and be the final patient care decision maker.
- Lack of understanding by trainees (and in some cases faculty) about what each profession does (both their training and clinical experience) is one of the largest gaps, and therefore impediment to understanding how to best work in teams.

Overall Insights:

- Important to align clinical educational interventions with key stakeholder needs, such as accreditation requirements, clinical outcomes needs, marketing needs and financial desires.
- Building an interprofessional experience for faculty and trainees is very time and resource intensive. Integration within the clinical setting requires significant buy-in from institutional leadership (both curriculum and clinical leaders).
- High numbers of learners in the exam room with the patient can be distracting from the interview and other work at hand. It is important to determine what the optimal number should be and what disciplines should be represented in the SDOH interview.
- We also learned (thru some students' concern/resistance to asking some of the 'personal' questions on the SDOH screen), that some preparation of students in advance of asking them to conduct the screens is ideal in order to increase learner understanding and comfort with the topics, as well as skills sets in empathy with patients and managing their own uneasiness.

Future Plans:

- Expansion of model to new clinical sites, including medical group practices and substance use disorder clinical sites as well as teaching safety net sites.
- Continue to engage stakeholders in complex patient integrated care teaching sites. Develop skill sets of other faculty in these settings. Share measurable results in local and regional clinical quality forums.

Publications or Presentations related to PACER work:

Presentations

National Center for Interprofessional Practice and Education - Nexus Summit 2018 – July 28 – August 1, 2018
Envisioning Access for All: Students Effectively Lead Interprofessional Teams Providing Care for the Uninsured and Impoverished in Urban Federally Qualified Health Centers
Jamie Holland, Tina Haney, Karen Knott.

STFM Annual Spring Conference – May 5-9, 2018

The Physician's Role in Interprofessional Care: First-Year Medical Students' Perceptions
Carmen Ingram-Thorpe, MPH; Megan O'Connor; Paige Green; Kyla Bass; James Coxe; Kaethe Ferguson, EdD, MS; Mekbib Gameda; Christine Matson, MD; Jennifer Ryal; Bruce Britton, MD

How Do Medical Students Want to Learn: Preferences for an Interprofessional Education

Megan O'Connor; Paige Green; Kyla Bass; James Coxe; Carmen Ingram-Thorpe, MPH; Kaethe Ferguson, EdD, MS; Mekbib Gameda, Bruce Britton, MD

National Association of Clinical Nurse Specialists Annual Conference – February 28 - March 3, 2018

The Clinical Nurse Specialist as a Leader and Facilitator for Patient Centered Care in an Urban Based Federally Qualified Clinic

Jamie Holland, MSN, AGCNS,RN and Tina Haney, DNP, CNS, RN

Esmwiller Interprofessional Symposium – February 3, 2018

Outcomes from a Student Run Interprofessional Clinic Designed to Address Social Determinants of Health
Jamie Holland MSN, AGCNS, RN and Tina Haney DNP, CNS, RN

STFM Medical Student Education Conference –February 1-4, 2018

The Interprofessional Care Clinic: Learning While Providing Care for Medically Underserved at High Risk for Preventable Hospitalization

Karen Kott PhD, PT; Jamie Holland, CNS; Tina Haney, DNP, CNS, RN; , Bruce Britton, MD

STFM Medical Student Education Conference – January 31 - February 3, 2019

Medical Students' Perceptions of Interprofessional Education (IPE) in the Clerkship Years

Sarah Judd; Alena Calderon-Guthe; Melvin Cabebe; Carmen Ingram-Thorpe, MPH; Kaethe Ferguson, EdD, MS; Jennifer Ryal, MD; Bruce Britton, MD

Team Members:

Name	Title
Bruce Britton, MD (Team Leader)	Professor and Director of Medical Student Education, Family and Community Medicine
Christine Matson, MD	Professor and Former Chair, Family and Community Medicine
Kaethe Ferguson, EdD (Site Evaluator / Team Leader)	Associate Professor and Director, Division of Community Health and Research Associate Residency Program Director, Grants & Research Department of Pediatrics
Jennifer Ryal MD	Assistant Professor, Internal Medicine
Jennifer Wohl, DHSc, PA-C	Assistant Professor, MPA Program
John Harrington, MD	Professor and Division Director of General Academic Pediatrics

Carmen Ingram-Thorpe, MPH	Program Coordinator for the supporting HRSA grant TEACH
Sharon C. Stull, BSDH, MS	Faculty Supervisor, Dental Hygiene
Karen Kott, PT	Faculty Supervisor, Physical Therapy
Traci Richards, PhD	Faculty Supervisor, Behavioral Counseling
Tina Haney	Faculty Supervisor, Nursing
Jamie Holland, MSN, CNS, RN	Doctor of Nursing student (coordinates clinical aspects of IPE clinic)
Ana Vazquez, MD	FM, Sentara ACC Family Medicine Resident Site Supervisor