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## Collaborative of the Primary Care Training Collaborative

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he Patient-Centered Medical Home (PCMH) is a model for practice redesign to assure that people are provided safe, comprehensive, coordinated, and personalized health care. However, most primary care residency programs are not fully prepared to train residents on this idealized model. It is critical that primary care residency programs serve as exemplars in this area since clinical training during residency strongly influences future practice patterns. Additionally, residents will be called upon for leadership and practice improvement skills to foster and support practice transformation in their future practices.

Over the last six years, five Collaboratives of primary care residency programs across the U.S. have recognized the need to include specific education and training for the PCMH into their curricula and training programs. These five Collaboratives include the Colorado Residency PCMH project, which encompasses all nine family medicine residency programs and one internal medicine residency program in Colorado; Harvard Primary Care collaborative, which includes 19 Harvard Medical School-affiliated primary care teaching practices and community clinics associated with six major academic health centers; 13 collaborative which includes 25 primary care teaching practices in North Carolina, South Carolina, and Virginia; Minnesota family medicine collaborative, which includes University of Minnesota's Internal Medicine, Pediatrics, Med-Peds, and Smiley's Family Medicine Residency Programs; and the Pennsylvania Collaborative, which includes 24 practices of Pennsylvania Family Medicine Residency Programs and 20 Community Health Centers.

Each of the five Collaboratives has unique goals and objectives; however commonality across them includes: facilitation and support for NCQA PPC-PCMH recognition; collecting and sharing of data and outcomes; coordination of 2-3 learning sessions (Learning Collaboratives) each year; curriculum redesign to include the PCMH; monthly webinars and conference calls; practice facilitation; and the development and support for quality improvement processes and team-based care.

The Colorado, I3 and Pennsylvania Collaboratives presented together at the 2012 Institute for Healthcare Improvement conference in Washington DC and have worked loosely together to collaborate and coordinate educational efforts. As more primary care training programs have begun to do this work, the Collaborative leaders recognized a need to bring all of the Collaboratives together to discuss best practices, challenges, and methods for tighter and coordinated collaboration among the Collaboratives. In October 2013, the Patient-Centered Primary Care Collaborative (PCPCC) facilitated the "Collaborative of the Collaboratives" where, for the first time, Colorado, I3, Harvard, and Pennsylvania all met together. The objectives for the Collaborative of the Collaboratives were: 1) describe the key experiences and lessons learned from each Collaborative; 2) discuss resources that are available from each Collaborative that can be shared across Collaboratives; and 3) discuss methods for creating a long-term learning community.

Main outcomes from the "Collaborative of the Collaboratives" included discussions about collecting and sharing common data for both resident and program outcomes. Colorado and Pennsylvania are using some common assessment tools to determine changes in residents' perceived competence for the PCMH, and implementation of the key components of the PCMH in routine patient care. The group also discussed methods for a common and/or standardized PCMH residency curriculum. Colorado has developed a comprehensive online PCMH e-Learning curriculum. This curriculum consists of 12 modules: 1) Introduction to the PCMH; 2) Family and Patient-Centered Care; 3) Patient Self-Management Support; 4) Population Management; 5) Meaningful Use and the PCMH; 6) Virtual Patient Registry; 7) Team Approach to Care; 8) Quality Improvement; 9) Access to Care; 10) Integrated and Coordinated Care; 11) PCMH Leadership Skills; and 12) Personal Physician. Colorado's PCMH e-Learning curriculum will be available for all family medicine residency programs through the American Board of Family Medicine website in Spring 2014.

Another area of interest identified by the group was to study the trajectory of change exhibited by different programs, practices, and programs. The group discussed at length the conundrum of the different rates of change across the different programs and across states. The group identified several factors that appear to be facilitators of change that they would like to investigate more thoroughly.

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## Collaborative of the Primary Care Training Collaboratives...continued

These facilitators include engaged leadership, both from the practice or program and the sponsoring organization/hospital; centralized oversight and organization for each collaborative; regular communication, which included monthly conference calls and webinars; collection and sharing of common data (i.e. diabetes outcomes); practice facilitation (i.e. an outside practice coach); engaged residents; and some form of financial support for either the centralized organizing group or the participating practices and programs.

Each of the Collaboratives convenes either quarterly or bi-annual "Learning Sessions" or Learning Collaboratives. These Learning Sessions were also identified as a key component for the success of each the Collaboratives. The Learning Sessions allow for the programs to get together on a regular basis to share ideas, discuss challenges, and gain momentum to continue with their PCMH transformation work. The Collaborative group discussed methods for working together to assist each other with ideas for speakers and topics for upcoming Learning Sessions.

Based on the success of the first "Collaborative of the Collaboratives", the group will meet again in March 2014 to follow up on discussions from the October 2013 meeting. Future outcomes from the Collaborative group include publications on their work and workshops to help guide other training programs on developing their own Collaboratives within their states or regions. The Collaborative group also plans to expand attendance at their meetings to other residency training groups in the near future. For more information about the "Collaborative of the Collaboratives", please contact Dr. Bill Warning (see below).

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