



THE PATIENT CENTERED MEDICAL HOME ROTATION: *PREPARING RESIDENTS FOR PRACTICE?*

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Overview

- Family Medicine Residency started the PCMH rotation in 2011
- Why was it created?
- What is the rotation?
- Is it preparing residents for practice?



I Have No Financial Disclosures



What is a PCMH?

- A model of care
 - ▣ Multi-disciplinary team based approach to care
 - ▣ Emphasizes constant data-driven improvement
 - ▣ Focus on complex patients
 - ▣ Prompt Access to care



Why Does This Matter?

- Improves Patient Experience
- Improving the Health of Populations
- Reducing the per capita cost of Health Care



Why Else Does This Matter?



- Incentives for meeting quality measures, certification (NCQA)
- Reimbursement increasingly tied to performance

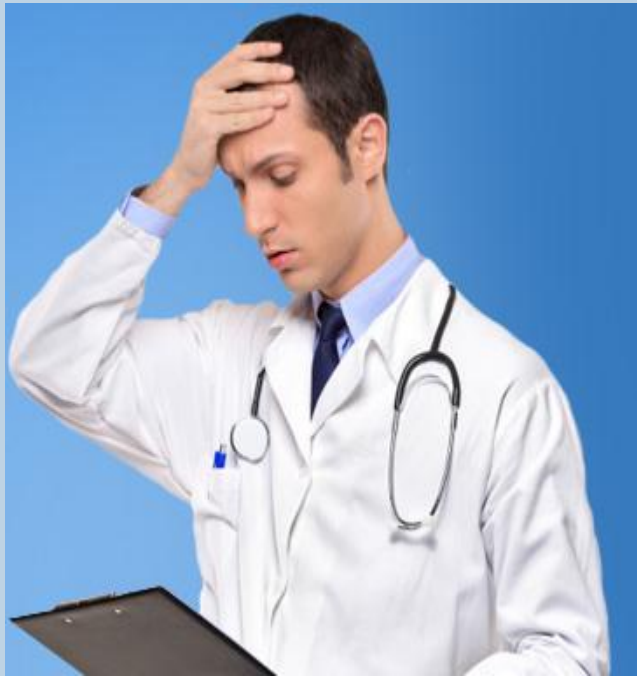


Background: Before the Rotation

- A scattered approach
 - Clinical experiences
 - FCC, NH, Practice Mgmt.
 - Significant PCMH faculty as role-models
 - Lectures
 - Annual 1/2 day workshop
 - Noon-conferences



Background: Needs Assessment



- Exit interviews of 2011 Grads
 - ▣ 50% Had never heard of NCQA
 - ▣ 25% felt prepared to lead a PDSA Cycle
 - ▣ Only 25% had completed a chart audit
 - ▣ Only 50% felt prepared to lead a GMV

The PCMH Rotation

- Our solution: The PCMH Team Block Rotation
 - ▣ Create a month long team based rotation
 - ▣ Team composed of first year, second year and third year resident



The Structure

- Early am: hospital patient search
- Multidisciplinary team meeting to review census, discharges, phone notes, plan acutes/day.
- Patient care responsibilities in FCC and NH
- A month-long PDSA Cycle
- Weekly didactics and projects
 - ▣ PCMH Basics, Patient Safety, GMVs, Documentation/Chart Audits and Coding



Is it Making a Difference?

- The Questions We Asked
 - ▣ Are residents getting more PCMH Experiences?
 - ▣ Are they more prepared to practice in a PCMH?

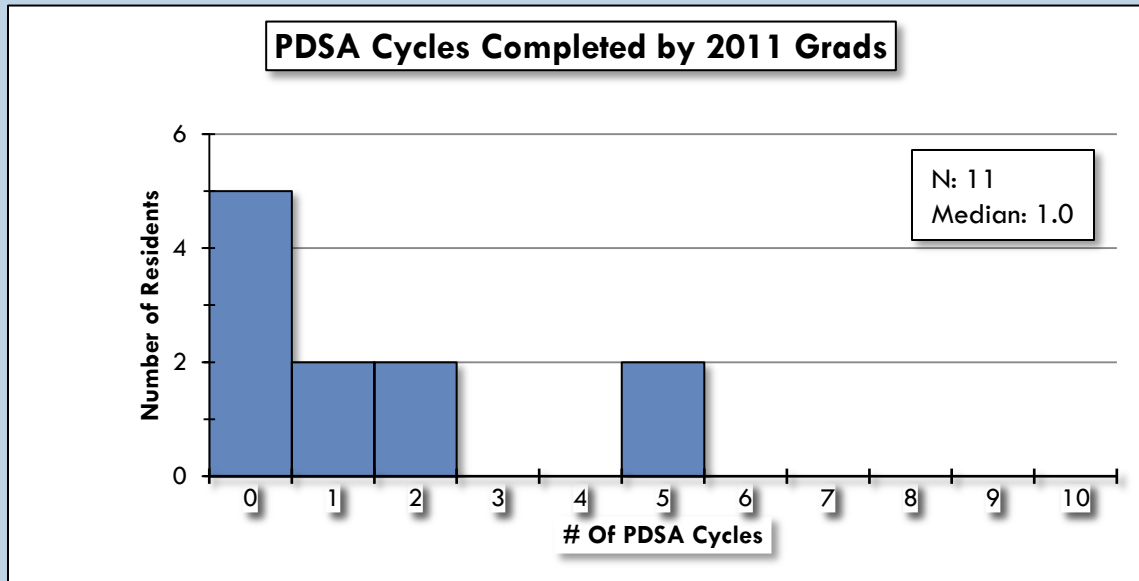
- Our Data Sources
 - ▣ Data from exit interviews of 2011 grads
 - ▣ Compared with exit interviews of 2012 grads



Are Residents Getting More Experience?



PDSA Cycles



P Value: 0.093
Using Mann-Whitney U Test

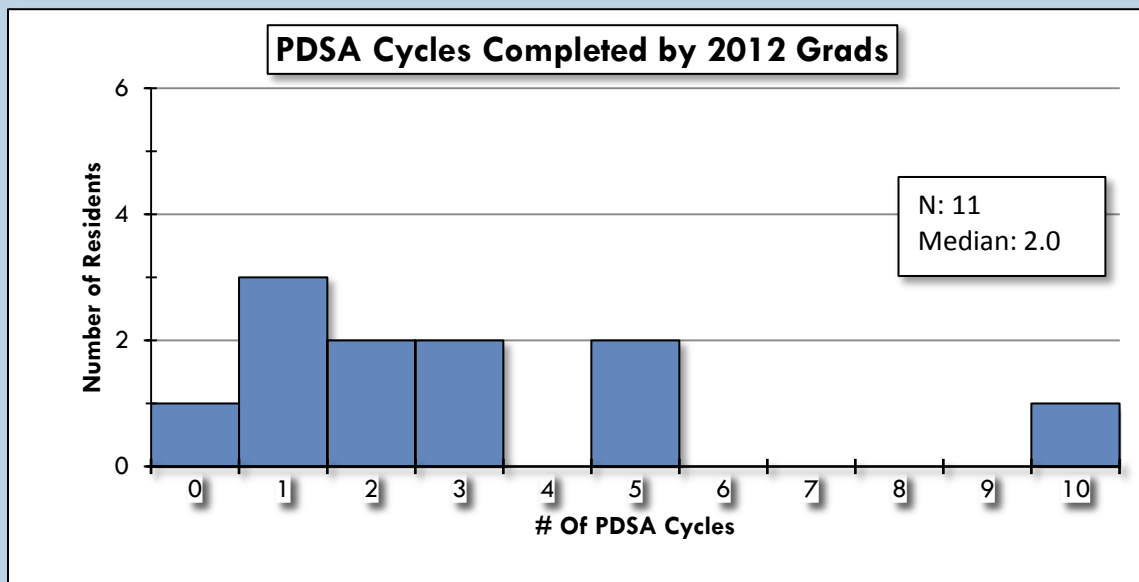
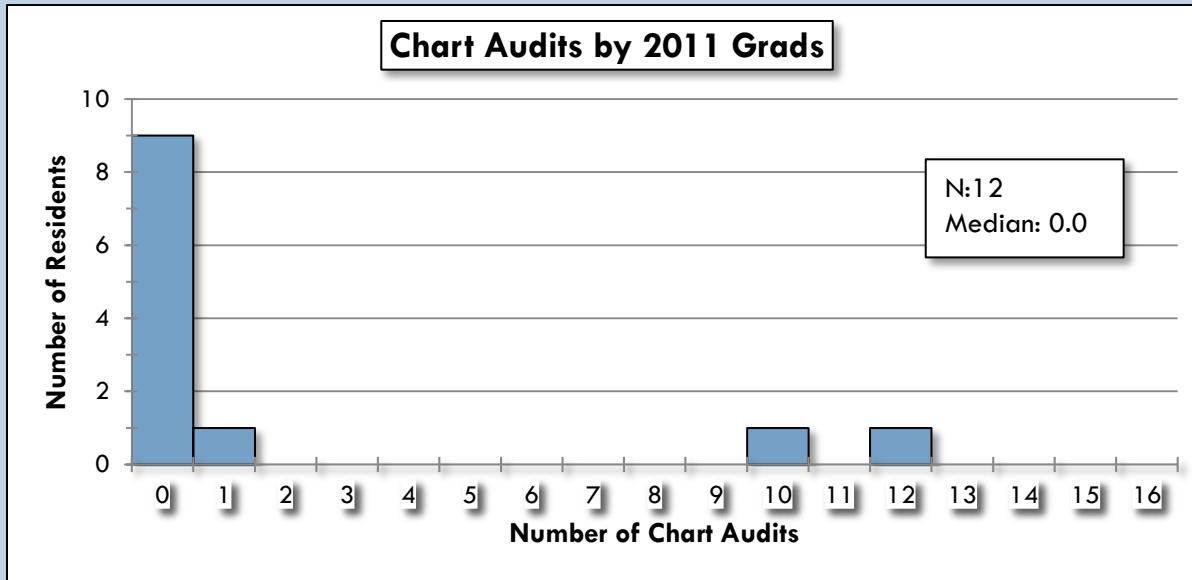
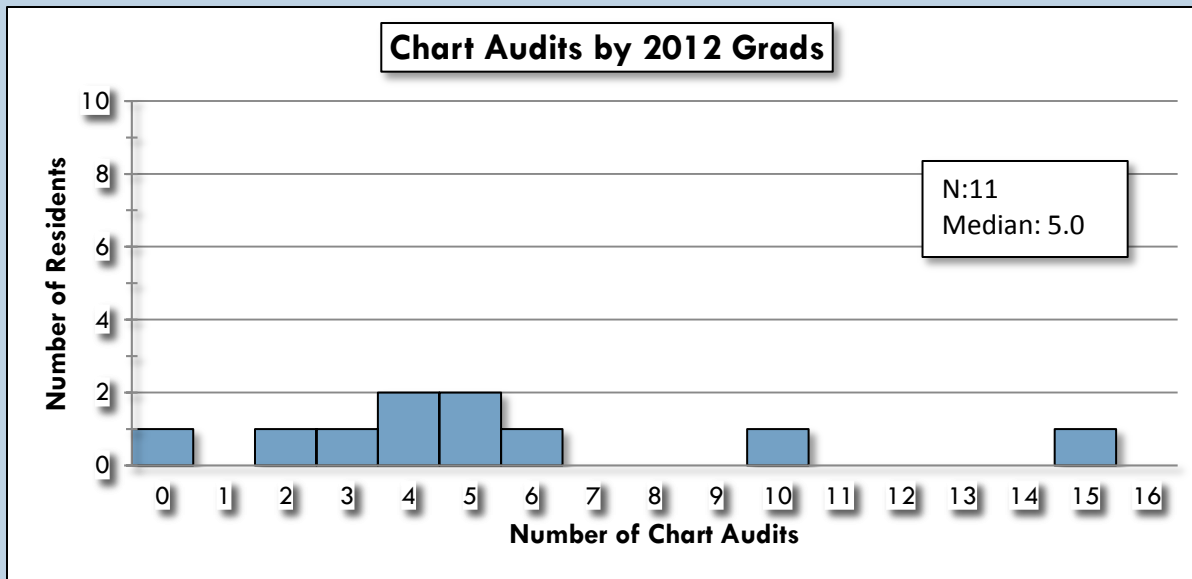


Chart Audits

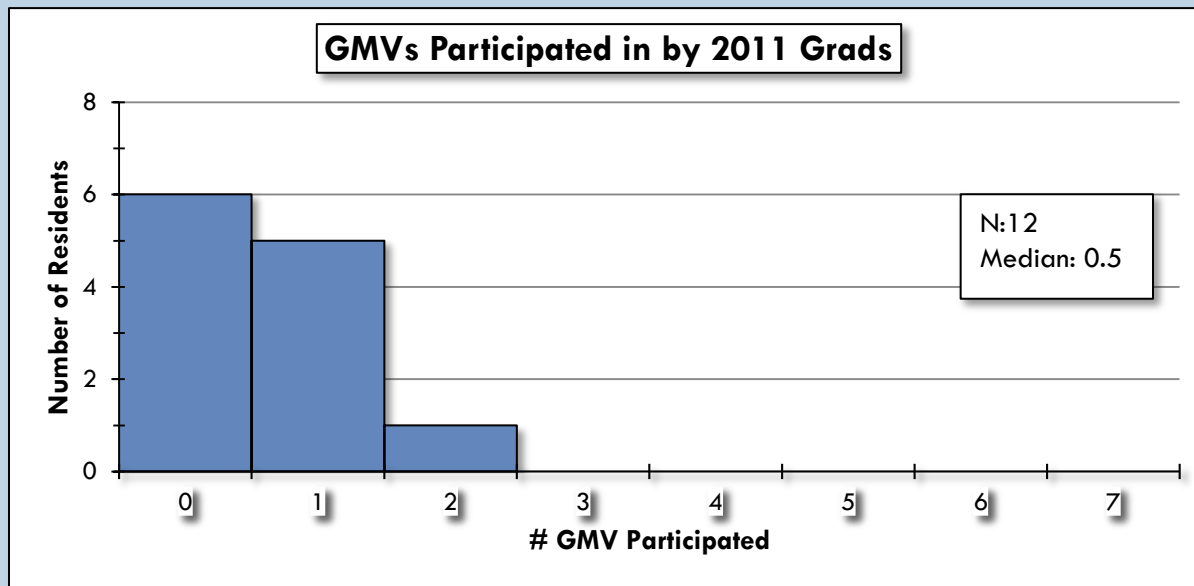


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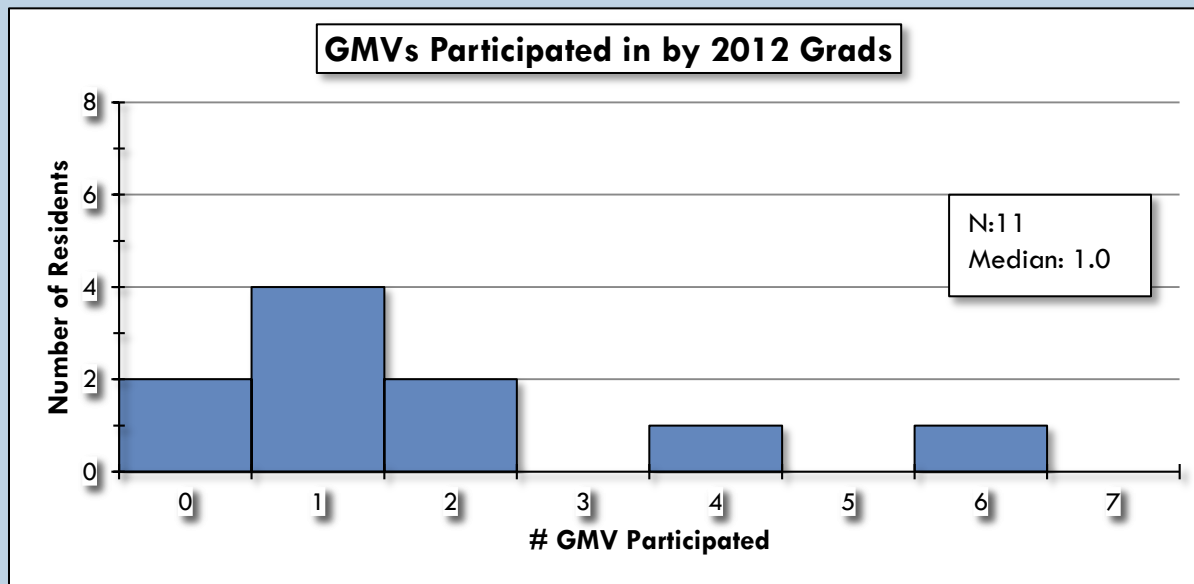
Using Mann-Whitney U Test



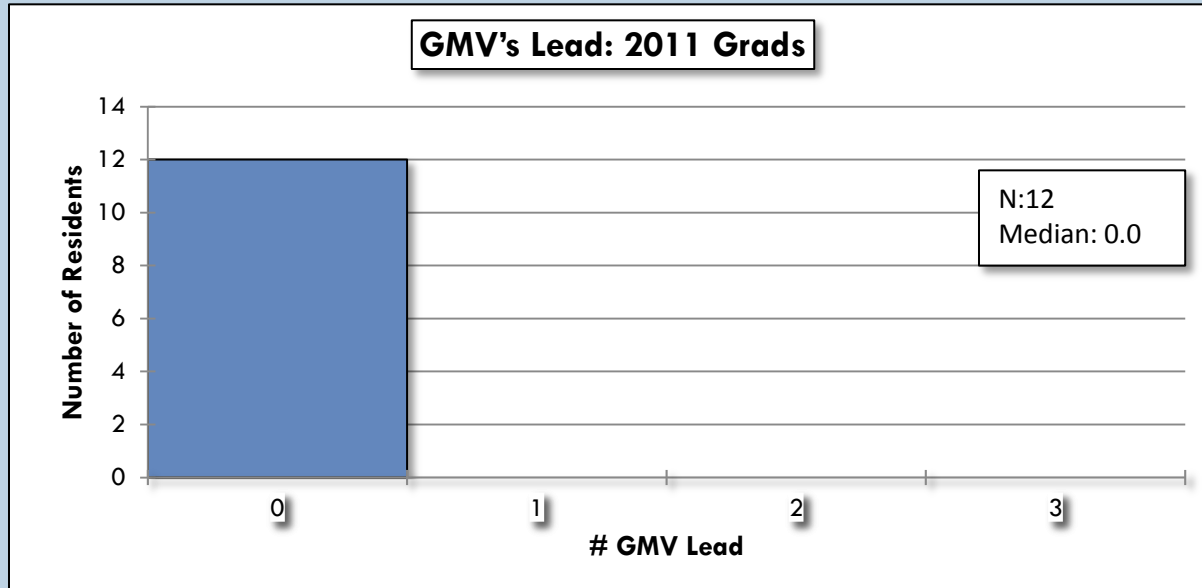
Group Medical Visits



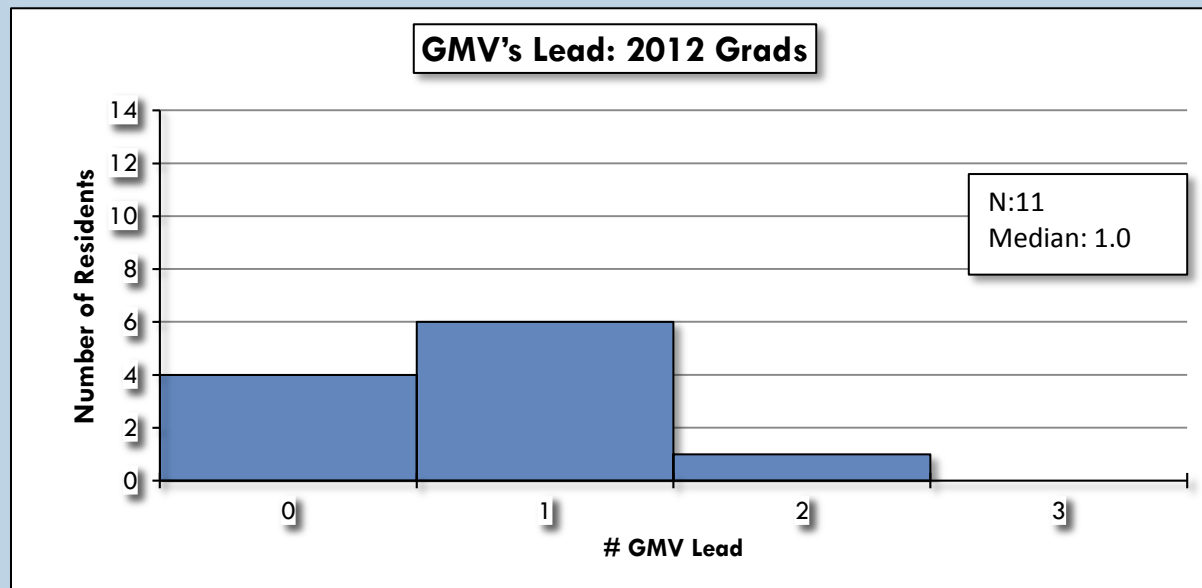
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Group Medical Visits



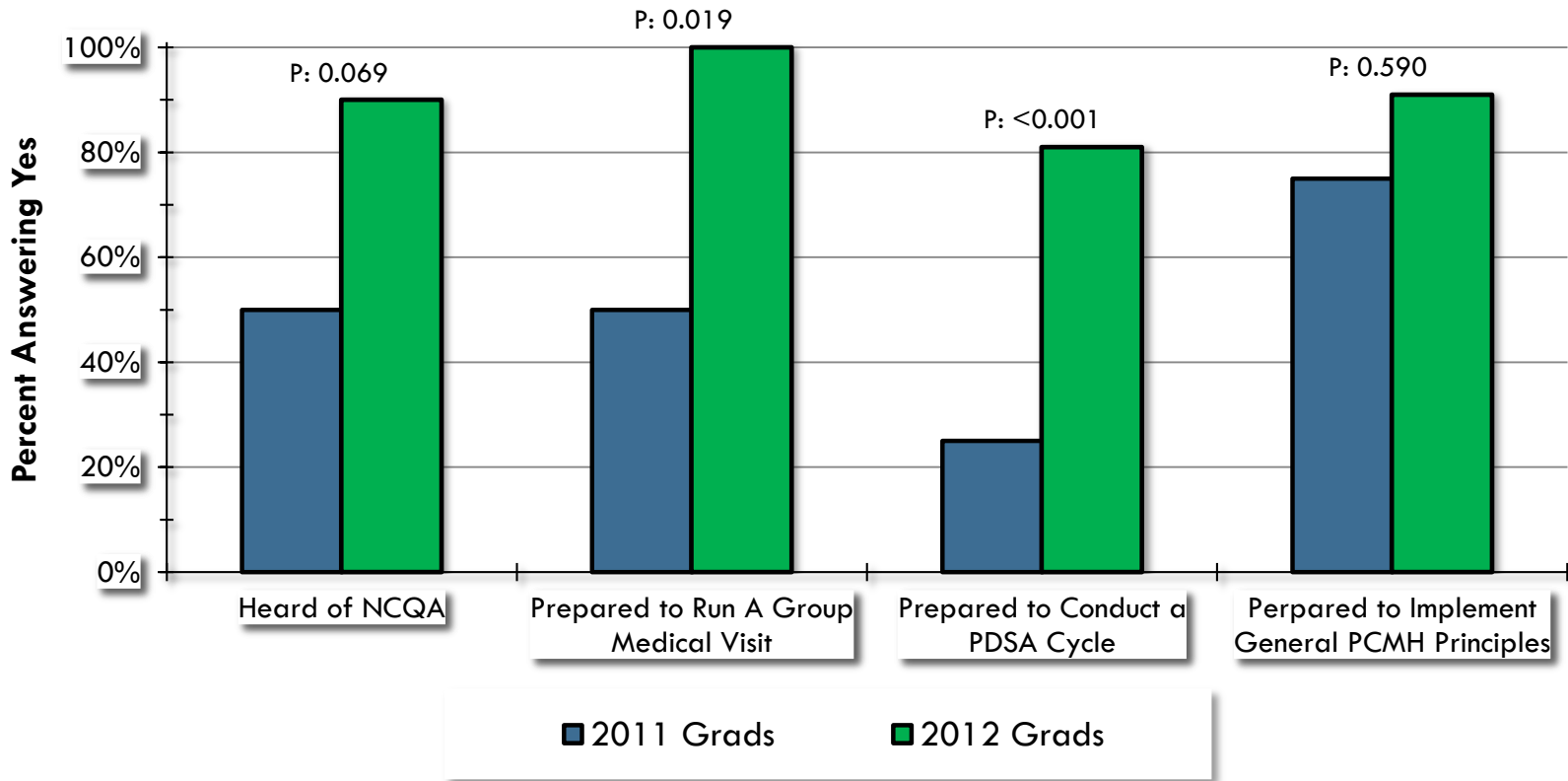
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Using Mann-Whitney U Test



Are Residents More Prepared?



Preparedness to Implement PCMH Principles



P-Values Calculated using Fishers Exact Test

Discussion

- ▣ Are the residents getting more PCMH Experiences?
 - Yes
- ▣ Are the residents more prepared to practice in a PCMH
 - Yes



Limitations

- Not a RCT
- Focused only on key concepts
- Subjective reports
- Data after only one year



The Future

- Rotation goals:
 - ▣ Continue to study the effect of the rotation
 - ▣ Use data to improve the rotation

- System Goals:
 - ▣ Continue to improve patient centered care in FCC
 - ▣ Serve as a model of Transitions in Care for MHRI/CNE



Acknowledgements

- Helen Bryan
- Roberta Goldman
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- Residents who participated in the surveys

References

- Willard, R., Bodenheimer, T., 2012, The Building Blocks of High Performing Primary Care: Lessons from the Field, *California HealthCare Foundation*
- Nielsen, M., Langner, B., Zema, C., Hacker, T., Grundy, P., 2012, Benefits of Implementing the Primary Care Patient-Centered Medical Home: A Review of Cost & Quality Results, *Patient Centered Primary Care Collaborative*
- Maeng, D., Graham, J., Graf, T., Liberman, J., Dermes, NB., Tomcagage, J., Davis, D., Bloom, f., Steele, G., Reducing Long-Term Cost by Transforming Primary Care: Evidence from Geisinger's Medical Home Model, *Am J Manag Care* 2012 Mar;18(3):149-55



Questions?



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