

ADVISORY COMMITTEE ON TRAINING IN PRIMARY CARE MEDICINE AND DENTISTRY

Minutes of Meeting – August 29, 2013

Advisory Committee Members present, via webinar:

Buerk, Ellen, MD, MEd
Harris, George D., MD, MS
Jackson, Angela H., MD
Jones, Anne C., DO
Morton-Rias, Dawn, EdD, PA-C
Rogers, John, MD, MPH, Med
Russell, Bob, DDS, MPH
Betz, William T., DO, MBA
Evans, Caswell A., DDS, MPH
Fox, Frederick J., MD, MPP
Johnson, Jean, PhD, RN
Keahey, David, J., MSPH, PA-C
Keller, David, MD
Rivera Nazario, Yilda M., DMD
Sharps, Gina, RDH
Kara Odom Walker, MD, MPH

Meeting Participants, via webinar included:

Shane Rogers, Designated Federal Official, ACTPCMD
Kathleen Klink, MD, Director, Division of Medicine and Dentistry

Attendees included the following:

AACOM GR
Alex Khalife
Anthony A
Benard Dreyer
Caption Colorado
Cindy Brach
David Kirby
Debbie Jaeger
Frederick J Fox MD MPP FACP
Hope Wittenberg
Iwona Grodecki
Jennifer Brown
Joanne Schwartzberg
LaEbony Livingston
Luis Flores
Maria Rosa Watson
Shannon Bolon
Shirley Linney
Stanley M Kozakowski

Sylvia Joice
Teresa Baker
Thomas Vallin
Virginia Meehan

Thursday, August 29, 2013

The Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD) convened its webinar meeting at 9:00 a.m. (ET). The webinar was managed out of the Health Resources and Services Administration's headquarters in the Parklawn Building, Room 18-57, 5600 Fishers Lane, Rockville, MD 20857.

Shane Rogers, the Designated Federal Official, started the meeting by providing some housekeeping items necessary for conducting the webinar. The meeting was turned-over to Caswell Evans, Chair for the ACTPCMD, who started the meeting with brief introductions and then requested a vote from the members to approve the minutes from the last meeting. The minutes were approved.

A change to the agenda included the removal of an update from Mary K. Wakefield, Administrator for the Health Resources and Service Administration (HRSA).

Kathleen Klink, Director for the Division of Medicine and Dentistry (DMD) at HRSA, provided a brief update on the Teaching Health Center Graduate Medical Education (THCGME) and the Children's Hospital Graduate Medical Education (CHGME) programs. Dr. Klink also briefly discussed the Primary Care Training and Education (PCTE) programs funded under Title VII. Dr. Klink announced the hire of Dr. Renee Joskow, who will be serving as the branch chief for the Oral Health Training Branch within DMD. Dr. Keller and David Keahey both emphasized the need for data release pertaining to the THCGME program and engaged Dr. Klink on the funding for the PCTE programs and how the five year funding now available for the program eliminates the option for funding between the five year funding cycles. Dr. Keller suggested that the members may want to discuss this in their next report.

Dr. Keller started his 11th Report update with describing the purpose behind the report which is to go beyond just recommending interdisciplinary education and saying that what is really needed is for trainees to be educated in clinical sites that actually practice in the community in interdisciplinary teams and to have those trainees work with teams that have worked together and developed competencies to work in those kinds of settings and with those kinds of teams. The 11th Report will focus on the Health Literacy and Patient Engagement, Behavioral and Mental Health, Oral Health Integration into Primary Care and the Integration of Training into Community Health Centers.

The first presentation of the day was conducted by Dr. Benard Dreyer, Professor of Pediatrics, NYU School of Medicine. Dr. Dreyer was asked to present to the members on the topic of health literacy and primary care. Dr. Dreyer serves as the Director of Developmental-Behavioral Pediatrics and the Director of Service at Bellevue Hospital Center. He is the Past President of the Academic Pediatric Association (APA) where he is also serving as the Co-chair of the AAP Project Advisory Committee on Health Literacy. His research and policy interest in health literacy has led to the publication of a book for pediatricians on health literacy strategies and resources titled *Plain Language Pediatrics*, the publication of a special issue of the journal *Pediatrics* that he edited, and his appointment to the Institute of Medicine (IOM) Roundtable on Health Literacy. Dr. Dreyer began his presentation by informing the members that he had communicated with Cindy Brach, who would be presenting on the same topic later in the day so they could coordinate their discussions on the topic so as to provide complimentary information rather

than duplicative. Dr. Dreyer's presentation would essentially cover Health Literacy 101, plus health literacy "on the ground" and how it affects physicians in primary care or in specialty care. Dr. Dreyer started by quoting the Healthy People 2010 definition of Health Literacy, which is, "to obtain, process, and understand basic health information and service to make appropriate health care decisions." He added those in the health literacy community generally add, "accessing and navigating the health care system". After Dr. Dreyer's presentation, Dr. Dawn Morton-Rias, member of the ACTPCMD and lead for the Health Literacy section of the 11th Report, then facilitated a subsequent question and answer discussion between the members and Dr. Dreyer.

The second presentation for the day was conducted by Dr. Maria-Rosa Watson, Epidemiologist and Research Director for the Primary Care Coalition of Montgomery County. Dr. Watson is a Board Diplomate of the American Board of Dental Public Health, a licensed Dentist in the District of Columbia, and has a DrPH from Johns Hopkins University School of Public Health. She has also served as an independent evaluator to a University of South Florida-CDC grant focused on using Community Based Participatory Research (CBPR) in the implementation of a peer-lead chronic illness self-management program to a county-wide collaborative emergency department diversion program designed to connect patients to primary care, and to a childhood obesity prevention and quality improvement program. Dr. Watson was asked to present to the members on the topic of oral health integration into primary care. She began with an outline that included a background of her work at the Primary Care Coalition, the current delivery of oral health in primary care settings, and a discussion of lessons learned on the ground. After Dr. Watson's presentation, Dr. Bob Russell, member of the ACTPCMD and lead for the Oral Health into Primary Care section of the 11th Report facilitated a subsequent question and answer discussion between the members and Dr. Watson.

The members then broke for lunch.

The third, and final, presentation of the day was conducted by Cindy Brach, who currently serves as a senior health policy researcher with the Systems Change Team at the Agency for Healthcare Research and Quality (AHRQ). Ms. Brach conducts and oversees research on health literacy, cultural and linguistic competence, quality improvement, Medicaid, and the State Children's Health Insurance Program. She also spearheads AHRQ's health literacy and cultural competence activities, coordinating the Agency's work in developing measures, improving the evidence base, and creating implementation tools, including the Health Literacy Universal Precautions Toolkit and the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Item Set for Addressing Health Literacy. She serves on the Institute of Medicine's Roundtable on Health Literacy and the Department of Health and Human Services' Health Literacy Working Group. Her publications include: *Ten Attributes of a Health Literate Organization*, *A Proposed 'Health Literate Care Model' Would Constitute a Systems Approach to Improving Patients' Engagement in Care*, *New Federal Policy Initiatives to Boost Health Literacy Can Help the Nation Move Beyond the Cycle of Costly "Crisis Care;"* and *America's Health Literacy: Why We Need Accessible Health Information*. Ms. Brach was asked to present to the members on the topic of Health Literacy. She began her presentation by thanking Dr. Cliff Coleman, who she considers a real expert in the field and that she would be presenting some of his findings during her presentation. She noted that health literacy is really beginning to come of age, noting that it is now recognized by a variety of organizations. Ms. Brach described the main challenges experienced with producing truly health literate professionals, including: 1) the fact that students are not necessarily selected for training based on their communication skills, 2) that students are instructed on health literacy, but generally consider its use as merely "jargon", and 3) she described the challenge with training students in health literacy in an already crowded curricula. Ms. Brach went on to discuss the current state of health literacy in clinical

practice and various approaches to incorporating health literacy into training curricula. After Ms. Brach's presentation, Dr. Dawn Morton-Rias, member of the ACTPCMD and lead for the Health Literacy section of the 11th Report then facilitated a subsequent question and answer discussion between the members and Dr. Dreyer.

The next item on the agenda included an update from David Keahey, member of the ACTPCMD and lead for the second section of the 11th Report, currently entitled, Community Health Centers and Beyond. Mr. Keahey started by echoing a previous comment from Dr. Keller that about half of the committee would soon be rotating-off and that there would be a vacuum of essential knowledge leaving, with no definitive timeline for their replacement. Mr. Keahey described the umbrella concept about the section by stating the fact that HRSA not only funds educational programs, which is the main focus on the ACTPCMD to advise HRSA on how funds may be used more effectively by grantees, but also community health centers and the National Health Service Corps. He then went on to thank Dr. Klink on her previous update pertaining to the THCGME program and reiterated the need for data on the programs. He noted that the goal is really to capitalize on the THCGME model and try to apply it to other professions, such as Physician Assistants. He also noted the recent White House initiative pertaining to veterans and getting them employed in community health centers, an estimated goal of about 8,000, in addition to moving veterans into training programs for the Physician Assistant profession. Mr. Keahey emphasized the importance of funding the training recommendations in this report through innovative grants focused in these areas. He finished his presentation with noting that weak in this early draft was the push to involve dental and oral health learners and he encouraged feedback from members with experience in this arena. Both Drs. Evans and Russell expressed interest.

The final 11th Report update for the day was conducted by Dr. David Keller, member of the ACTPCMD and lead for the development of the 11th report. Dr. Keller is also leading the Behavioral and Mental Health section of the report. Dr. Keller expressed challenges with this section as there are so many different models out there today, noting that some were evidence-based and some were not. He highlighted the one clear thing about his research which was that the inclusion of behavior health into primary care is core to a population-based healthcare system. He described that, with relation to the report, behavioral and mental health could be really divided into three separate buckets: 1) how health behaviors influence illness, particularly chronic disease, and therefore impact health outcomes, 2) the high prevalence of relatively low morbidity mental health conditions, such as mild anxiety disorders and mild depression and things that are often handled a primary care level and should be, that may require developing a chronic disease model for mental illnesses as a chronic disease, as opposed to an episodic event or something that general goes away, and 3) the dual eligible, and looking at people who have serious mental illnesses chronic disease and identifying exactly where they should be cared for. He noted that there is currently a lot of discussion taking place about where the right place is for the health home for people with serious mental illness. He finished his discussion with the three questions: 1) how do you define the edges of these three buckets, 2) how do you determine who goes into which kind of care, and 3) at what point does serious mental illness become serious enough that it needs to be at a specialty center?

The members then discussed the timeline for the report, but noted the challenge for this discussion due to the upcoming loss of so many members.

Dr. Evans thanked the members who would soon be rotating-off for their time and efforts with the committee.

There were no public comments and the meeting was adjourned at 2:30 p.m. (ET)