

ADVISORY COMMITTEE ON TRAINING IN PRIMARY CARE MEDICINE AND DENTISTRY

Meeting Minutes: February 6, 2015

Advisory Committee Members Present:

Caswell A. Evans, Jr., DDS, MPH, Chair
David J. Keahey, MSPH, PA-C, Vice Chair
Vicki Chan-Padgett, MPAS, PA-C
Frederick J. Fox, MD, MPP, FACP
Elizabeth Kalliath, DMD
David Keller, MD
Allen Perkins, MD, MPH
Yilda M. Rivera Nazario, DMD
Gina Sharps, MPH, RDH
Eve Switzer, MD, FAAP
Elizabeth Wiley, MD, JD, MPH
Stephen Wilson, MD, MPH

Others Present:

Joan Weiss, PhD, RN, CRNP, FAAN, Designated Federal Official, ACICBL, HRSA
Kim Kline, Director, Bureau of Health Workforce, HRSA
Candice Chen, MD, MPH, Director, Division of Medicine and Dentistry, HRSA
Crystal Straughn, Technical Writer, HRSA
Maria Portela Martinez, MD, MPH Medical Training and Geriatrics Branch Chief
Sherrilyn Crooks, PA, Public Health Analyst
George Zangaro, PHD, RN, FAAN

Introduction

The Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD) convened its meeting at 10:00 a.m. at the Health Resources and Services Administration's headquarters in the Parklawn Building, Room 15W-48, 5600 Fishers Lane, Rockville, MD 20857.

Dr. Joan Weiss, Designated Federal Official, opened the meeting and introduced Dr. Maria Portela Martinez, the Chief of the Medical Training and Geriatrics Branch. Dr. Martinez expressed her delight in attending the meeting and that she looked forward to hearing more about the Committee's recommendations. Dr. Weiss reviewed the agenda and noted that the presentations scheduled for the meeting would include updates on the programs the Committee oversees in the Division of Medicine and Dentistry. She also explained that the presentation on projections of workforce supply and demand would provide the committee with updates, as workforce projections have been of interest to the Committee, and have also been the subject of several of their reports. She then turned the meeting over to Dr. Caswell Evans, the Committee Chair, who introduced the first presenter.

Presentations

Ms. Sherrilyn Crooks provided an update on the Primary Care Training and Enhancement (PCTE) Program. She discussed the current funding opportunities and highlighted the PCTE grant program's two main goals of strengthening the primary care workforce by supporting enhanced training for caregivers, and promoting primary care practice in rural and underserved areas. She then provided a detailed description of the application process, eligibility requirements, use of funds, areas of emphasis, and evaluation methods. Ms. Crooks and Dr. Candice Chen then answered Committee members' questions on the limited length of time (60 days) during which applications for the grant could be submitted, Congressional support for the Teaching Health Center Graduate Medical Education program, and on the funding for both the Primary Care Residency Expansion program and Graduate Medical Education.

Dr. Candice Chen then gave an update on the Oral Health Education and Training Programs. Dr. Chen discussed the funding opportunity announcements for the Post-Doctoral Training in General, Pediatric, and Public Health Dentistry Grant Program; the Pre-Doctoral Training in General, Pediatric, and Public Health Dentistry and Dental Health Program; and the Grant to States to Support Oral Health Workforce Activities. She stressed that throughout these funding opportunity announcements, it is important for grantees to look at the outcomes of their training activities. She further noted that when grantees are changing their clinical training environments, they should also look at outcomes related to patient care and patient access in those clinical training environments. Individuals trained in a clinical training environment that provides better care will go on to provide better care. In response to a Committee member's question, she also spoke about the contract consultant who would help grantees with the evaluation of their programs in order to demonstrate their successes and the lessons learned.

ACTPCMD 12th Report Discussion

Dr. Allen Perkins introduced the discussion of the 12th Report on Health Literacy and Patient Engagement. The Committee members agreed on the need to make recommendations that were specific, measurable, attainable, realistic, and timely (SMART) for the programs under Title VII, Part C, Sections 747 and 748. They further agreed to create SMART objectives that would help train leaders who would change health care systems for the better. The Committee discussed the following possible recommendations:

- Title VII, Part C, Section 747 and 748 grantees should develop curricula on healthcare financing, health systems, and advocacy skills to improve care delivery.
- Title VII, Part C, Section 747 and 748 grantees should graduate learners who have the knowledge, skills, and abilities in evaluation strategies to develop outcome measures that capture improve centered health outcomes.
- Title VII, Part C, Section 747 and 748 grantees should enhance curricula to teach learners how to address and recognize health literacy and social determinants of health.
- Title VII, Part C, Section 747 and 748 grantees should train health care professionals to work with their patients to improve health literacy.
- Title VII, Part C, Section 747 and 748 grantees should teach learners at all stages (undergraduate, graduate and continuing education) of their professional education about social determinants of health.

Presentation

The afternoon session began with Dr. George Zangaro's presentation on the report, "Projecting the Supply and Demand for Primary Care Practitioners Through 2020," which was released in November 2013. Dr. Zangaro explained how the report used macro simulation and micro simulation models. The report considered the needed workforce in the context of current circumstances. He explained why this report had different projections than other reports, pointing to who was considered a primary care provider and how they would fit into health care teams and systems. He provided a definition of primary care provider, and explained how future projections with the model would be able to account for the types of systems where providers work. Dr. Zangaro mentioned working with other countries to find or create a metric to factor in team-based care and medical home models. A question was raised about the productivity assumptions used in the report on the demand and productivity sides of the model; Dr. Zangaro will provide that answer at a later date, as well as respond to any future recommendations from the Committee.

ACTPCMD 12th Report Discussion

The Committee then returned to discussion on the 12th Report. Following a discussion on the structure of the report, it was decided to put recommendations at the beginning of the report and then refer to them in the narrative, rather than restating each one. They also agreed to take an outside-in, broad-to-narrow approach to the writing, moving from social determinants, to the health care system and health literacy, to doctor and patient interaction. Committee members also discussed adding a section to the report on how health beliefs affect health literacy.

Discussion then turned to training health professionals in models of care. The Committee considered adding more language about prevention and proposing curricula changes to improve health literacy training. Motivational interviewing and teach-back techniques were moved to the health literacy section. In considering health literacy as a topic of the report, the Committee reflected upon how their recommendations would work to improve communication at both a population level and on a doctor to patient level. The Committee also recognized the difficulty of balancing the need to train health professionals versus the overwhelming problems of society.

The Committee then moved to the business portion of the meeting. Dates were suggested for the next meeting and there was a discussion of when new members would join the Committee. After further discussion, the Committee determined that a topic for consideration for their next report may include hospice and palliative care.

A comment was made about Primary Care Residency Expansion (funding for residency spots), and it was proposed that the Committee write a letter expressing support for continued funding. After much discussion, the Committee decided not to pursue the subject. Dr. Weiss then opened the floor to public comments. There were no comments.

The meeting was adjourned at 3:45 p.m.