

2023 Grantee Annual Meeting



Hyatt Regency Crystal City At Reagan National Airport
Arlington, VA

A partnership between





Disclosures

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Collaborations for Teaching Health Centers

Authority Health, Detroit, MI

MAHEC, North Carolina

Jordan Valley, MO





Objectives

Attendees will be able to:

1. Detail why collaboration is a pivotal component to Teaching Health Centers
2. Outline examples of working partnerships in training, education, and clinical practice
3. Identify the pressure points of collaborations and the potential for impact



Teaching Health Center

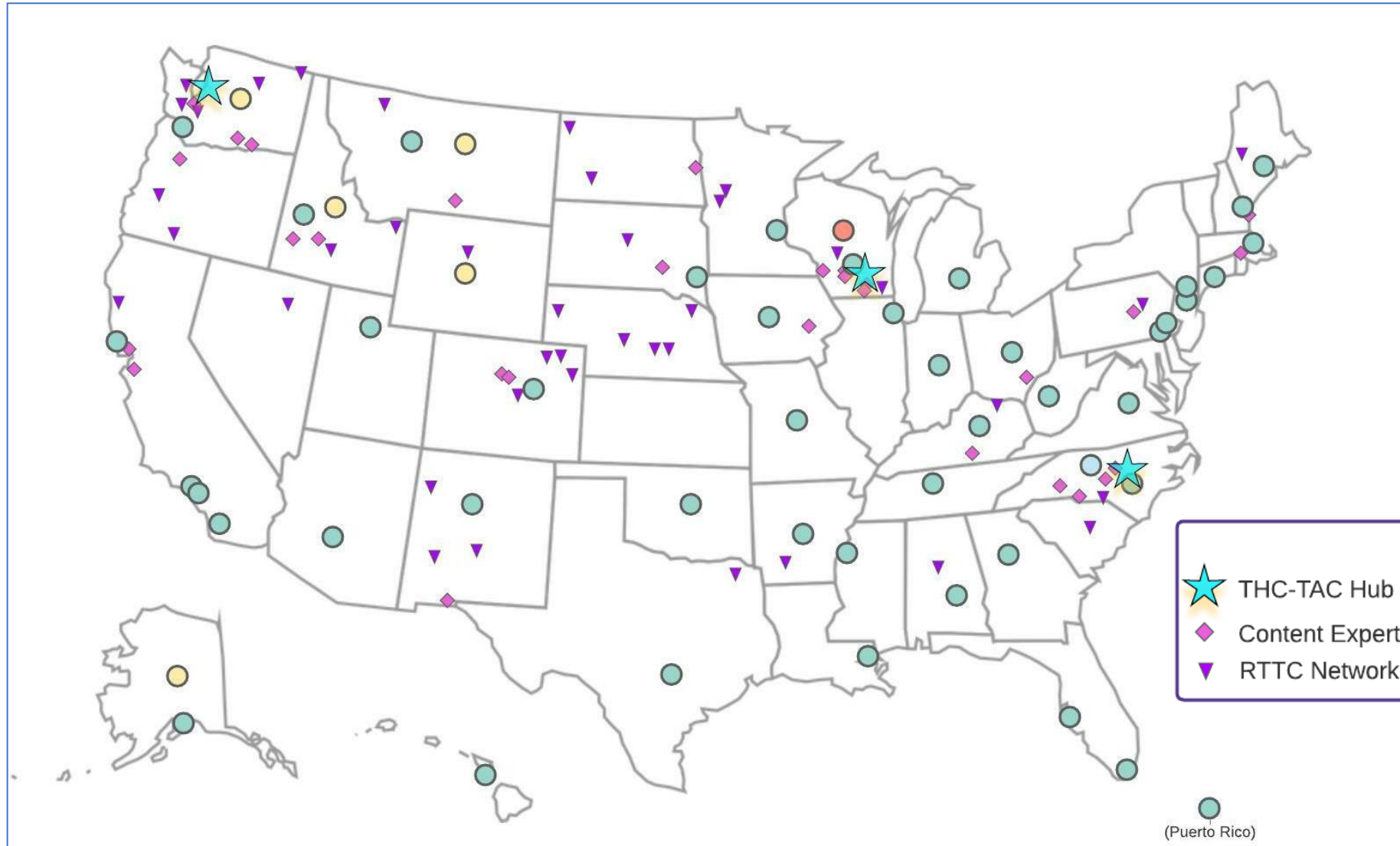
Community-Based Ambulatory Center becomes the focus for training

Training in the settings of need

Intent to provide additional service and education that translates to more equitable workforce distribution

Reporting for social accountability

THCPD Program and TA Center Maps



KEY

- | | |
|--|---|
|  THC-TAC Hub |  WWAMI Network |
|  Content Expert |  WCRME Network |
|  RTTC Network |  NC AHEC Network |

(Puerto Rico)

Abundance and Opportunity: Unique Challenges and High Impact



Rich cultural and immersive experiences

Less capacity for teaching with clinical demands

More social capital

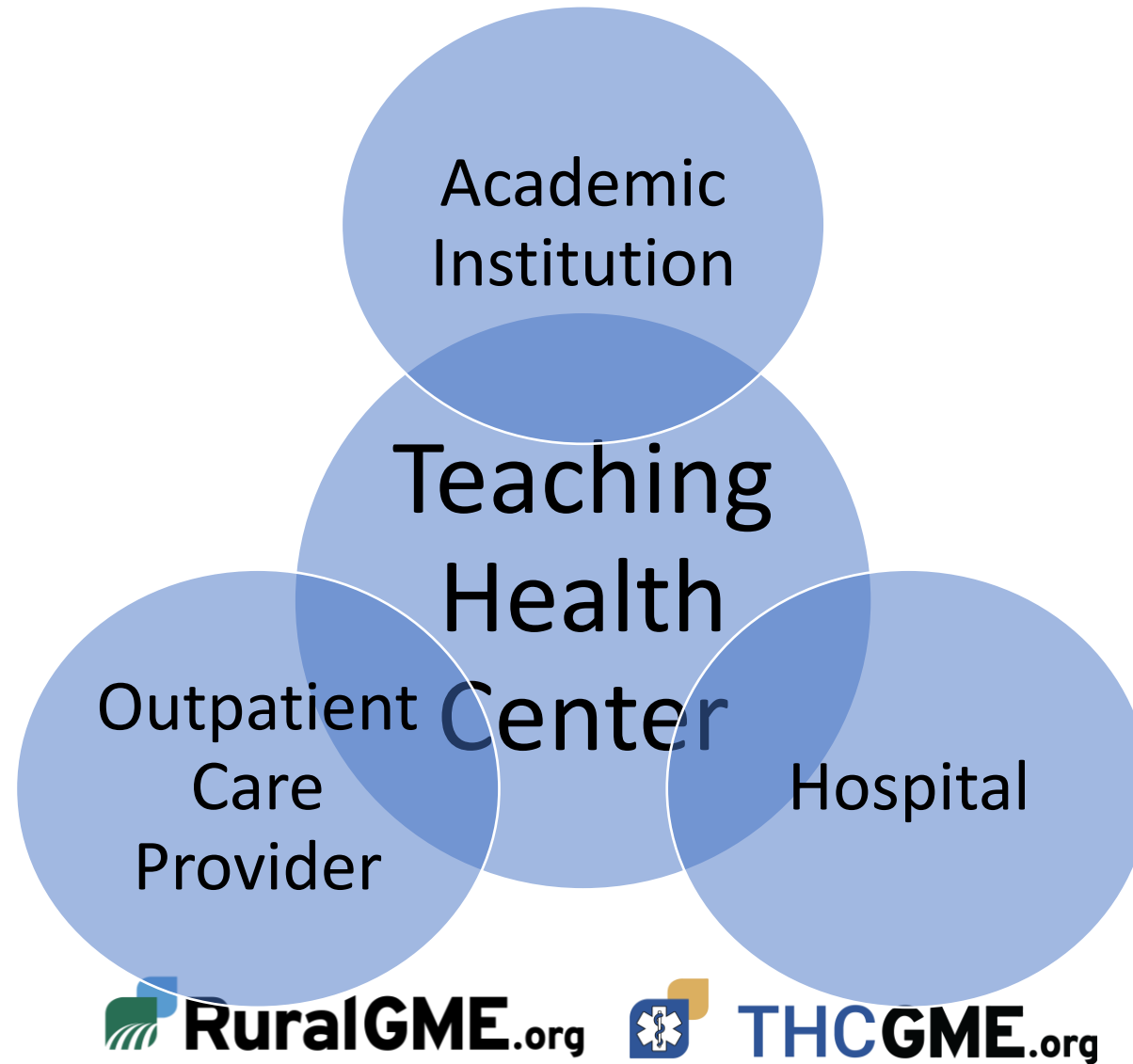
Less academic background

Less bureaucracy

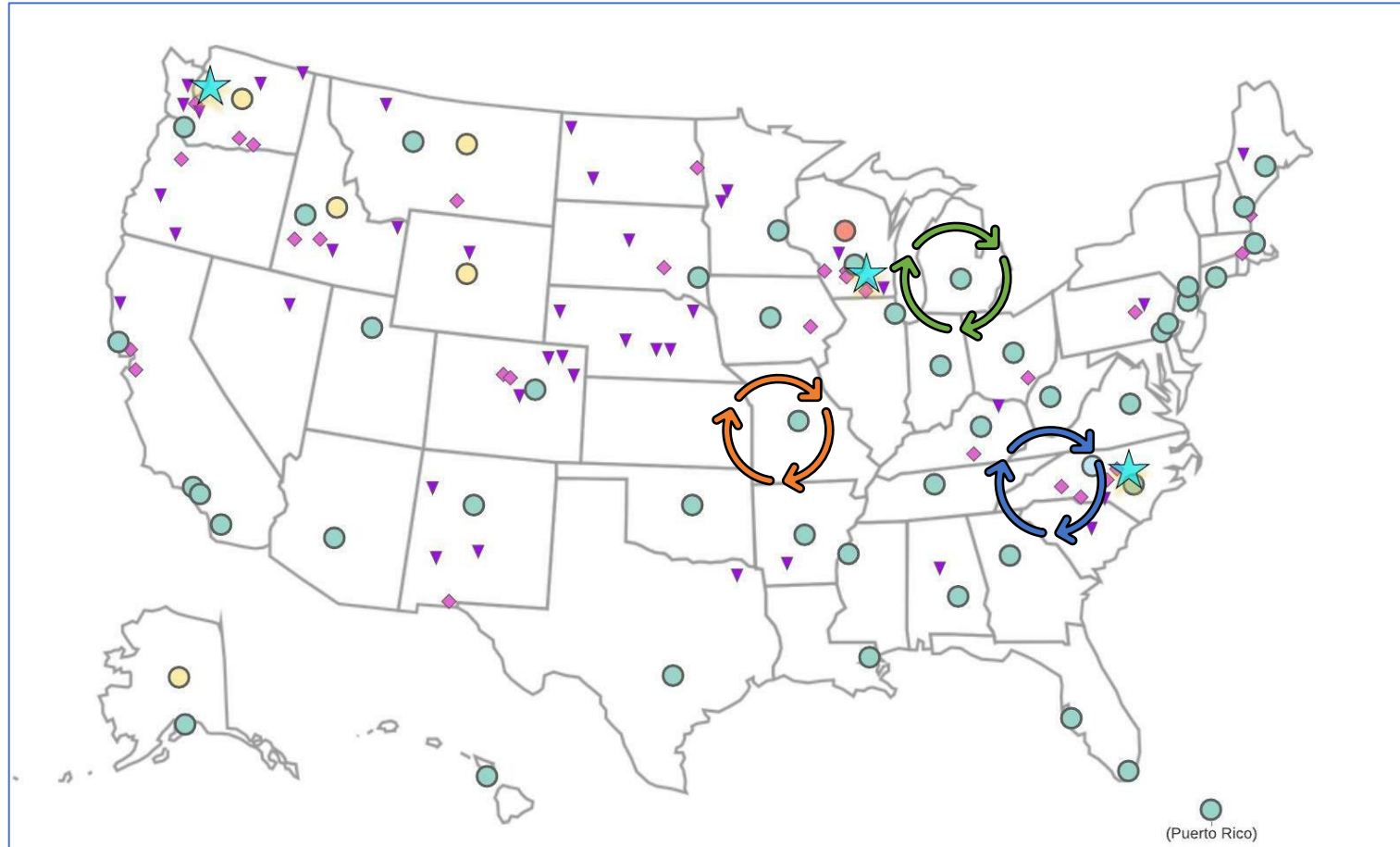
Collaboration



Key Contributors- Form Follows Function



Examples of Working Partnerships





THCPD Program Structure

Program Sponsor

Non-profit healthcare organization
(n=30)

Public/State Controlled Institution of
Higher Education (n=11)

Private Institution of Higher Education
(n=3)

Non-profit healthcare foundation
(n=1)

For-profit healthcare organization
(n=1)

Class Size Per Year

One (n=1)

Two (n=14)

Three (n=10)

Four (n=8)

Six (n=5)

Eight (n=5)

Twelve (n=1)

Partners

School of Medicine
Affiliation (n=43)

VA Partnerships (n=10)

I/T/U Partnership (n=5)



Detroit Wayne County Health Authority



- Authority Health – THC-GME Consortium
- Established 2004 to assure the safety net for Detroit/SEM vulnerable
- Interlocal agreement (MI, Wayne Co., Detroit) Quasi-Govern
- Board of Directors appointed, strategic plan: mission, vision, values, strategies/goals
- GME, Medicaid enrollment/navigation, Clinical practices
- GME THC Consortium Board

Detroit Wayne-Partnerships



Consortium

- DWCHA THC GME Consortium
- Michigan State University COM, Statewide Campus System
- 5 FQHC partners, local private practices serving vulnerable
- Individual community practices, by specialty



Affiliates

- DMC: Children's & Sinai-Grace Hospitals
- Ascension Health: Providence & St. John Hospitals
- VAMC-Detroit
- UofM School of Public Health – Population Health Certificate/DEI
- Community Organizations (PHC, Brilliant Detroit, etc.)
- MPCA – resident placement in FQHC/RC

Detroit Wayne- Clinical Practices and Integration



- 5 practices
- NP/PA students; Pharmacy students, MA students, medical students- MSU, WSU, CHW
- Psychiatry residents at primary care practices (case reviews, consultation, medication reviews)
- Residents integrated with hospital residents on all inpatient services



Jordan Valley Community Health Center



- Jordan Valley Community Health Center was established in 2003 by a group of community member who aimed to improve the accessibility of health care for those in need.
 - Medical services were initially offered in a small clinic at a Springfield, Missouri strip mall.
 - In 2004, dental services were offered at Jordan Valley.
 - When the dental clinic opened the wait time was 3-months.
 - In 2009 the first satellite clinic opened in a rural Missouri community, offering both medical and dental services.



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Jordan Valley

- Over nine Jordan Valley locations.
 - Over 700 employees
 - Over 50-providers providing medical or behavioral health services.
 - 39 Dental Providers (2 oral surgeons, 1 Periodontist, 3 Pediatric Dentists, 3 residents, 9 hygienists and remainder are general dentists)
 - Over 100 employees in the organization are dedicated to our dental program.
 - Dental patients and visits rank in the top 10 in FQHCs across the country
 - Jordan Valley has one of the largest oral health programs in the Midwest.



Jordan Valley – Improving Care



- Dental into Pediatrics
- Dental into Women's Health
- Medical and Dental patients of record integrated in behavioral health and behavioral medicine.
- Therapy services into primary care

Benefits

- Patient centered and focused
- Improved patient compliance
- Reduced no-shows
- Improved productivity
- Access/referral to additional resources

Challenges

- Provider education and training
- Time
- Staff/resources
- Insurance models limiting same day practices

Jordan Valley - Improving Integration



- NYU Langone partnership for AEGD Dental Residency
- CoxHealth partnership for Family Medicine
 - Currently planning for in-house Family Medicine Residency and Pediatric Dental residency.

Integration

- Provider pods
- Integration percentage report cards
- Locating services within the same clinical space
 - Not just down the hall or in the same building
- Shared support staff and management
 - Front desk, CHW, care coordinators
 - Departmental meetings focused on integration
- Provider champions



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MAHEC



MAHEC's Mission is to transform health in Western North Carolina through:

- RECRUITMENT
- TRAINING
- RETENTION

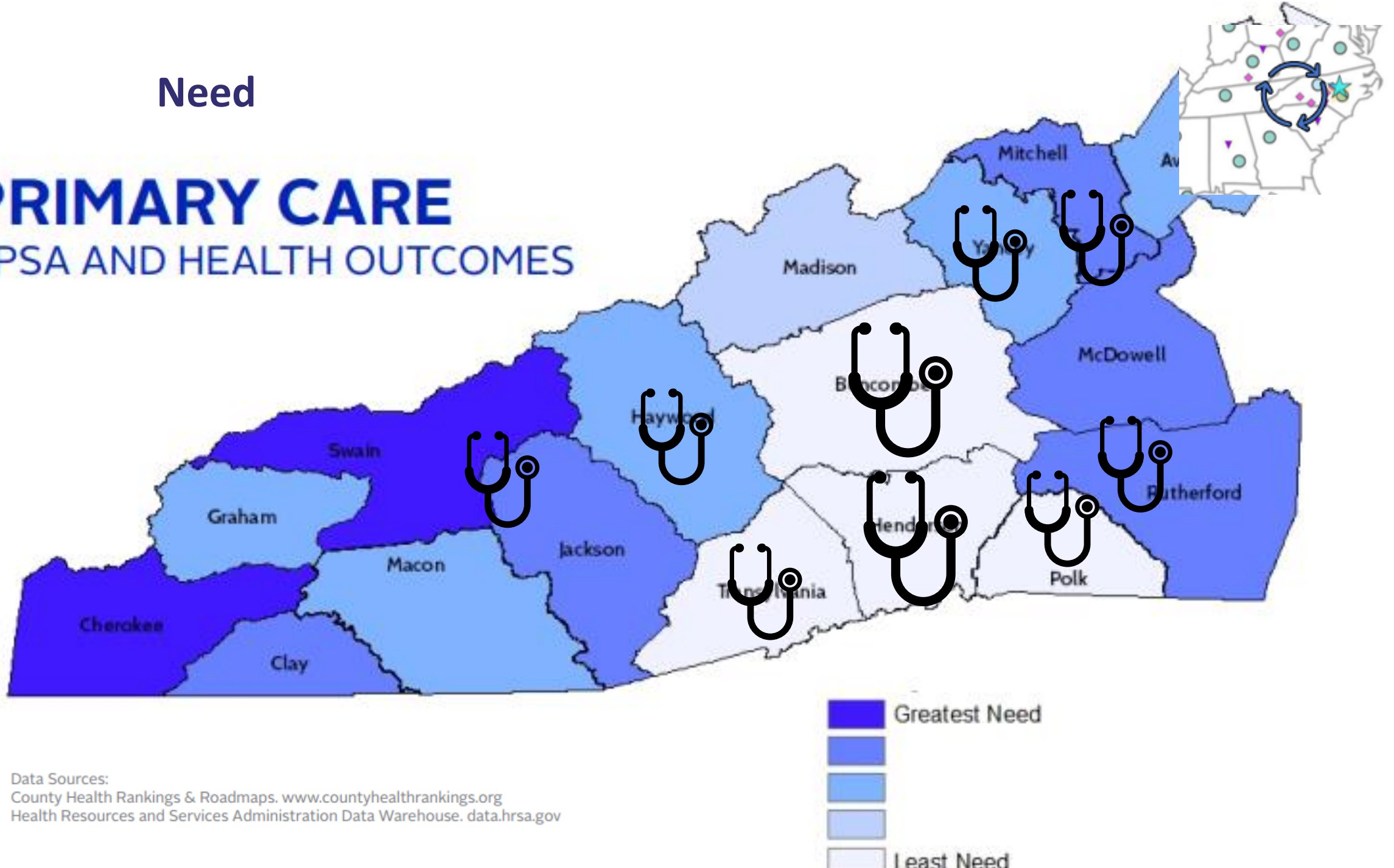
The future health workforce of WNC

- MAHEC has clinical operations as a look-alike FQHC, academic programming with health professional students, residents, and pathway programs, and community engagement.
- MAHEC converted 2 of our family medicine programs and our dental residency programs to THC's to expand their programs in 2013.
- MAHEC has expanded these efforts and now receives
 - five THC awards across FM, OB, and dental
 - 18 residency positions in underserved medical and dental training sites at community-based health centers, rural health clinics, and Tribal-affiliated health centers.

Need

PRIMARY CARE

HPSA AND HEALTH OUTCOMES



Data Sources:
County Health Rankings & Roadmaps. www.countyhealthrankings.org
Health Resources and Services Administration Data Warehouse. data.hrsa.gov

MAHEC- Partnerships



- Mountain Area Health Education Center (MAHEC) partnered for consortium with
 - Margaret Pardee Hospital
 - Blue Ridge Health, a community health center in Hendersonville, NC, to launch a family medicine residency in 1994
- Program Expansion with THC at several locations including Family Medicine, Dental, and Obstetrics and Gynecology.
 - Expanded locations to include rural outreach satellite offices
- Affiliations with Health Professional Schools with UNC Health Sciences at MAHEC



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MAHEC- Integration

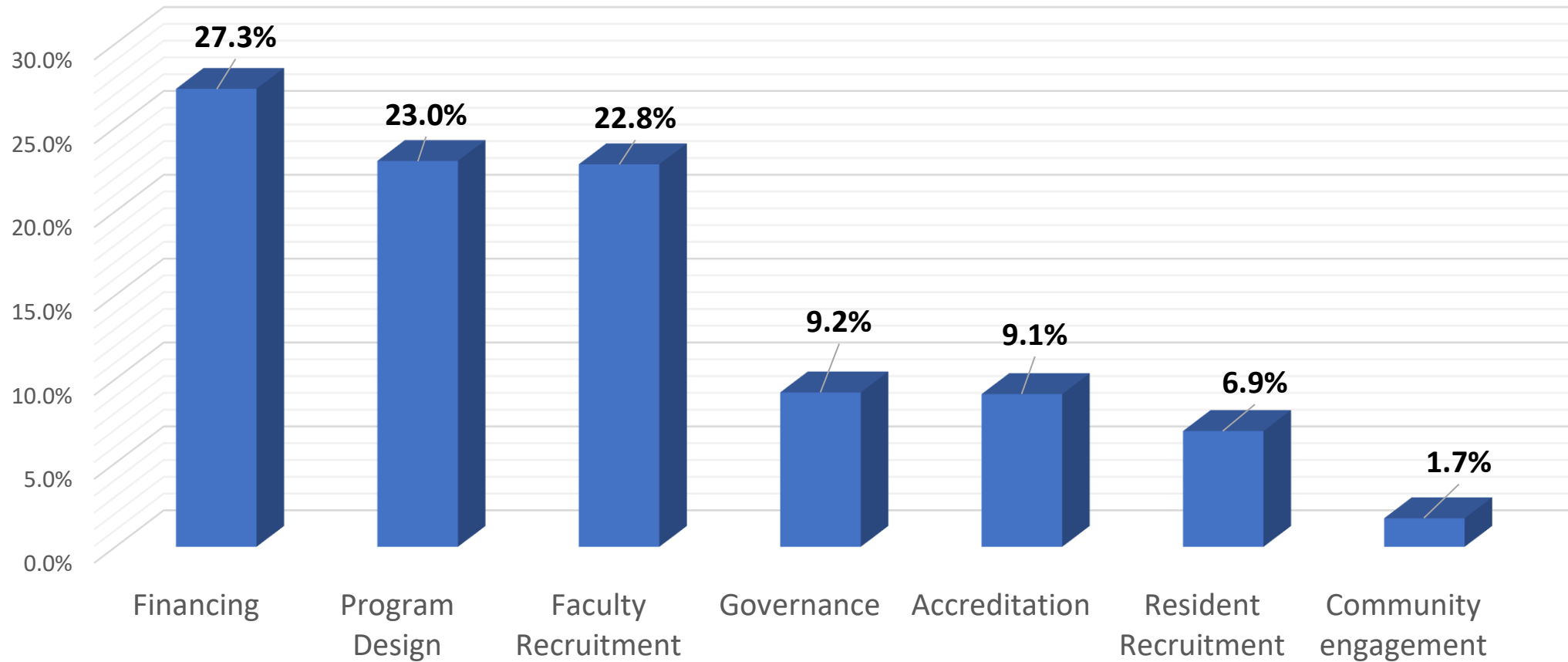


- BH
- LCSW
- Nutritionist
- CHW
- Clinical Pharmacists

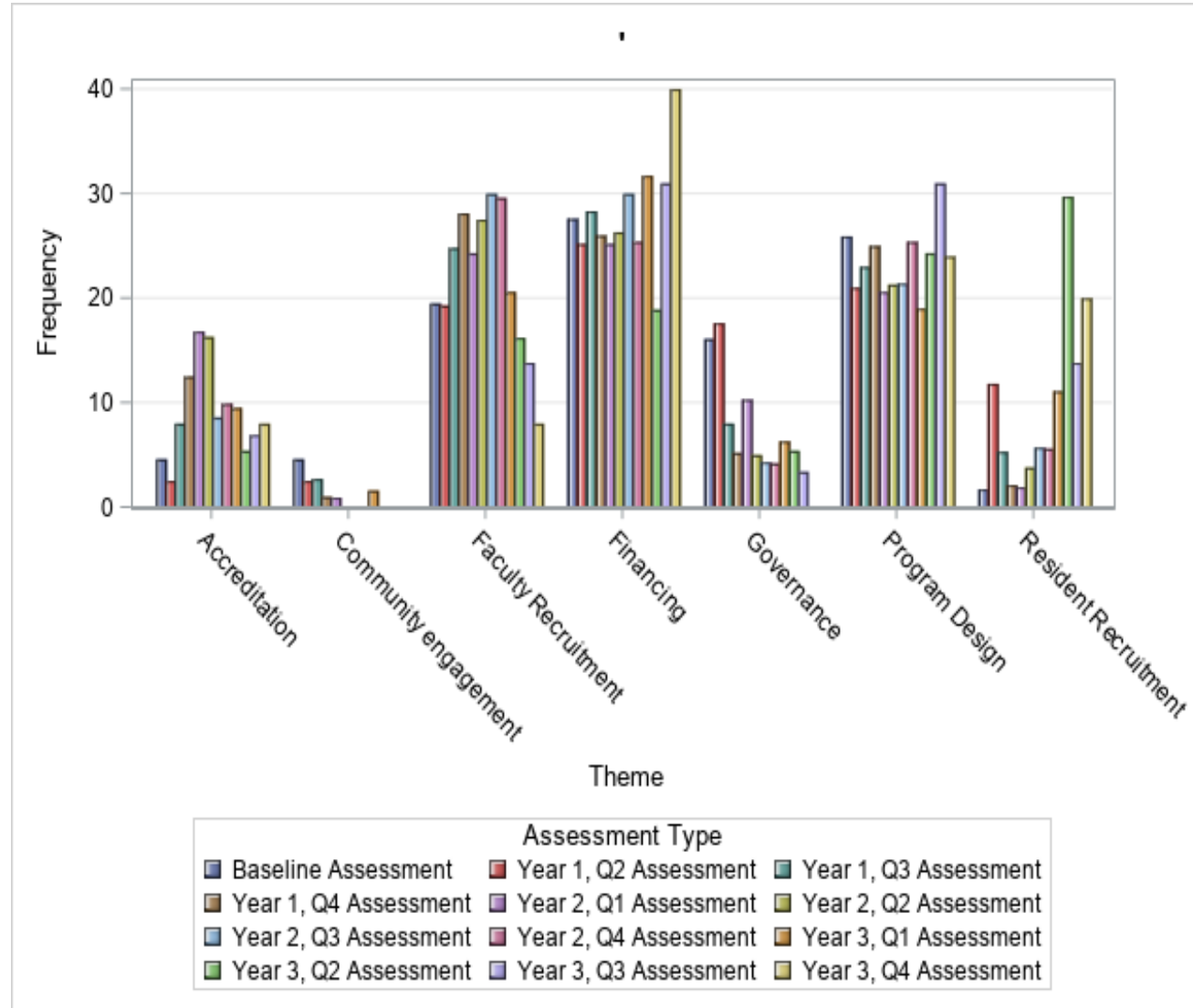


- *With Learners: Shared didactics, rotations, and rounding
- Team-based care infrastructure across training sites where residents work in partnership with other health professionals to deliver high-quality primary care to their patients

Common Barriers to Program Development



Seasonal Barriers to Program Development By Timeline





Common Challenges

Finances

- . HRSA THCGME
- . Clinical services
- . Grants
- . State Appropriations



Common Challenges

Program Design and Integration:

- Provider education and training
- Time
- Staff/resources
- Insurance models limiting same day practices.

Common Challenges



Culture:

Service verses Education  Service AND Education

- “A cultural change, where the THC grant helped form relationships and created this shared vision that ultimately allowed for the growth of the FQHCs in the community and improved access.”

--- Residency Leader

Contracts and PLA's (the fences for good neighbors)

- Institutional responsibilities (ACGME, supervision, quality, etc.)
- GME Consortium responsibilities (liability ins. and legal responsibilities)
- Federal, state, local laws (abide)
- Program/PD responsibilities
- Training goals and expectations
- Assignment and evaluation of residents
- Program financing (teaching stipend)
- Patient care, medical records, confidentiality, etc.
- Liability





Allowing Partnerships to Thrive

- The same principles that make for a high-functioning clinician in less resourced places are applied to building training programs in under-resourced centers
 - Adaptability
 - Resiliency
 - Dealing with Scarcity
 - Relationship Management



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Impact- Collaborative Culture Change

- Capacity at clinical sites (outpatient, inpatient)
- Quality reviews and studies at clinical sites
- Collaboration on clinical research
- CMS reporting – specified in agreements



Impact- Clinical

- Jordan Valley

- 33,168 unique dental patients
- 240,346 total visits for the 66,914 patients
- 69,848 total dental visits
- 42.5 % of women's health patients have had a dental appointment in the past 6 months.
- 65.2% of patients that have had a 20-week ultrasound have had dental visits in the past 6 months.
- 97% of Speech and Occupational Therapy patients are seen in our medical primary care clinics.
- 40.3% of Speech and OT patients are seen in dental.
- 82% of BH patients are seen at JV for primary medical or dental care.
- 71% of behavioral medicine patients are seen at JV for primary medical or dental care.



Impact- Placement

Outcomes that Serve

- Greater than 80% Medically Underserved Area placement relative to the National Average of 25%
- 16% Rural WNC placement relative to 3% of all state programs placed in rural NC counties

	2014-2022 (Last 8 Years)					
	NC	Rural*	WNC	WNC Rural*	MUA *	MUP*
Total Across Programs N = 131	57.3%	29%	51.1%	16%	80.2%	20.6%
FM –AVL N=96	59.4%	27.1%	52.1%	15.6%	78.1%	21.9%
FM –HVL N=35	51.4%	34.3%	48.6%	17.1%	85.7%	17.1%

Impact- Economic



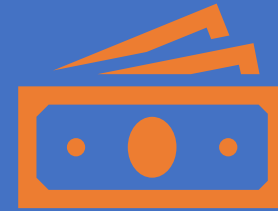
AMA –Findings on average per physician in NC (IQVIA, 2018)



Total output:
\$2,150,795



Total Jobs:
12.7



Total Salaries
and Benefits:
\$981,313



State and
Local tax
revenue:
\$83,043



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Final Points



- Collaboration is transformative across partnerships
- GME programs that not only train exceptional medical professionals but also serve as catalysts for positive change in underserved communities.
- Continuous collaboration and innovation fulfills our mission to educate and serve with excellence, ultimately enhancing healthcare access and outcomes for those who need it most.



QUESTIONS



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