

# TEACHING HEALTH CENTERS: A RESOURCE GUIDE

## Academic & HCH Collaborations

AUGUST 2013

### Why this guide?

The purpose of this resource guide is to assist Health Care for the Homeless (HCH) grantees with their efforts to establish and strengthen collaborations with academic institutions, which include medical and allied health professional training schools. A large number of HCH grantees already collaborate with academic entities in providing education to students and residents; however, many are not accredited and/or do not receive additional funding for providing these educational opportunities.

### Who is this guide for?

This resource guide will be useful for administrators interested in learning the potential benefits of having students and/or residents serve patients and learn at their sites. This guide will provide the resources needed to assist in developing meaningful relationships with academic partners and information on how to seek accreditation as a Teaching Health Center (THC) to provide Graduate Medical Education (GME).

### What does this guide include?

This guide provides resources and literature related to teaching health center collaborations, information on seeking accreditation, and guidance on pursuing funding through the Health Resources and Services Administration (HRSA) THCGME program, a time-limited resident reimbursement program.

### What can you expect to gain from this guide?

- You will be able to explain the characteristics of a successful collaboration and strategies for establishing or improving your own collaboration with academic partners.
- You will be able to identify accrediting bodies that meet HRSA THCGME eligibility requirements.
- You will be able to discuss HRSA THCGME program requirements and resources available to assist.

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## **Introduction**

The notion of academic and health center collaborations is not a new concept for Health Center Program grantees, particularly those receiving Health Care for the Homeless (HCH) funding. For many years, HCH grantees have engaged in collaborations with academic institutions for the purpose of educating the future health care workforce through the provision of real-life, hands-on work experience for health professions students and residents. As a result, HCH grantees have not only contributed to workforce development but have also improved the quality of care provided to patients through the use of evidenced-based practices and innovative research.

To obtain a better understanding of the existing collaborations among HCH grantees, the National Health Care for the Homeless Council conducted a survey assessing the experiences of HCH grantees in educating students. More than half (52%) of the total 224 HCH grantees<sup>1</sup> provided information on their health center's collaborations. Among those HCH grantees, 87% were currently collaborating with a university, medical school, or allied health professions school to educate students through observation or service provision. Close to 90% of those respondents reported that they collaborate with more than one academic institution and that these relationships have been intact for more than five years.<sup>2</sup>

**87% of HCH grantee respondents collaborate with academic institutions**

**87% collaborate with more than one academic institution**

**80% have been engaged in these collaborations for more than 5 years**

Survey findings reveal emerging factors that contribute to successful collaborations and those that present challenges. The most common obstacle reported was a lack of financial resources to support the education of health professions students, particularly relating to needs and physical space. Commonly, respondents who did not have a collaboration, reported that their organization lacked several pieces necessary to develop a collaboration, including knowledge on how to establish a collaboration with an academic institution, staff to educate students, and financial resources and physical space to accommodate students. Regardless of these limitations, HCH grantees who did not have collaborations reported they would be interested in establishing one (88%); among those that currently had collaborations, 56% reported that maintaining their current collaboration was very important.

<sup>1</sup> At the time of the survey (Spring 2012), there were 224 HRSA funded 330(h) grantees.

<sup>2</sup> National Health Care for the Homeless Council (2013). Teaching Health Centers: A Case Study (Exploring Experiences and Benefits in Seeking Accreditation). [Author: Patrina Twilley, Research Assistant] Nashville, TN: Available at: <http://www.nhchc.org/2013/04/teaching-health-centers-a-case-study/>

## **Establishing and Strengthening Collaborations**

The following resources provide information on how to establish and strengthen collaborations with academic institutions. A description of HRSA's data warehouse is included to demonstrate how to locate potential collaborators in your area.

### **“Academic Health Centers and Community Health Centers: The Landscape of Current Partnerships”**

Available at: [http://www.aahcdc.org/policy/reddot/AAHC\\_Community\\_Health\\_Centers\\_The\\_Landscape.pdf](http://www.aahcdc.org/policy/reddot/AAHC_Community_Health_Centers_The_Landscape.pdf)

- This article presents the initial findings of a survey conducted by the Association of Academic Health Centers. Similar to the National HCH Council, this association assessed partnerships between academic health centers and community health centers to gain an understanding of how these partnerships were structured and managed. Beyond challenges and successes, the article discusses what they learned from respondents around collaborative strategies, staffing, financial support, and research through collaboration.

### **“Community-University Partnerships for Mutual Learning”**

Available at: <http://quod.lib.umich.edu/cgi/t/text/pageviewer-idx?c=mjcs;cc=mjcs;rgn=full%20text;idno=3239521.0005.110;didno=3239521.0005.110;view=image;seq=0000001>

- This article discusses “service learning” and what has been learned about developing partnerships with a national Health Professions School program. The findings demonstrate how service learning programs affect community-university partnerships and the effect of health profession students on community partners.

### **“Community-University Partnerships: What Do We Know?”**

Available at: [http://depts.washington.edu/ccph/pdf\\_files/symposium\\_report.pdf](http://depts.washington.edu/ccph/pdf_files/symposium_report.pdf)

- This document provides detailed notes of a symposium jointly planned and sponsored by Community Campus Partnerships for Health (CCPH) and U.S. Department of Housing and Urban Development (HUD) Office of University Partnerships. The symposium was developed to address several challenges, including a focus on strengthening the research and evaluation aspects of community-university partnerships for the purposes of ongoing quality improvement and developing new relationships. In response to this challenge, successful “community-university” partnerships were defined, as well as components that contributed and/or interfered with these relationships.

### **“Engagement through University Community Partnerships: Key Strategies for Success”**

Available at: [http://www.pew-partnership.org/pdf/new\\_directions/2\\_partnerships.pdf](http://www.pew-partnership.org/pdf/new_directions/2_partnerships.pdf)

- This article describes the key elements of successful university-community partnerships from the academic perspective. Specifically, Auburn University discusses a thorough process of updating their mission and providing a new tenure structure for their faculty with a focus on outreach – placing faculty in an area where their work matters most, developing an appreciation for community, and making a long-term commitment for this engagement.

DATA SOURCES:

- Health Resources & Services Administration (HRSA) – Data Warehouse  
<http://datawarehouse.hrsa.gov/>
  - As noted in a newsletter on behalf of *Community Health Partners for Sustainability* (<http://www.chpfs.org/chpfs/index.php>), “HRSA’s Data Warehouse is a great resource to locate providers in your area and begin assessing your relationships. Some simple questions:
    - ❖ Who are our current hospital partners and what is the extent of our partnership (i.e., MOUs, informal relationship)?
    - ❖ Who don't we currently work with and how can we arrange a meeting to introduce ourselves?
    - ❖ Where are our gaps in patient coverage or referral services, and which hospitals serve these areas or provide these services?
    - ❖ How can we evaluate current partnerships and demonstrate their impact?

This isn’t an easy process, as it involves quite a bit of up-front commitment with delayed rewards, but [it will likely] be worth the effort to better position your clinic moving forward.”

### **Seeking Accreditation as a Teaching Health Center**

Seeking accreditation as a Teaching Health Center (THC) to provide Graduate Medical Education (GME) may be a possible solution for alleviating some of the financial burden of resident education. The THC model has existed for nearly three decades and has a long history of documented success in educating future physicians. The model consists of a distinct shared mission of service and education that must be adopted by any health center implementing this type of learning model and seeking GME accreditation. Having staff that dedicate their time and skills to providing services to patients and also possess a shared passion for teaching students and residents is vital to the success of a THC program.<sup>3</sup>

The following links are relevant and appropriate accrediting bodies; each has specific rules and guidelines for applying. Accreditation instructions and requirements, costs associated with becoming accredited, and the typical length of the process can be found on their respective websites or by contacting a representative at the organization.

#### **Accreditation Council of Graduate Medical Education (ACGME) – <http://www.acgme.org/acgmeweb/>**

- The Accreditation Council of Graduate Medical Education (ACGME) is a private, non-profit Council responsible for the accreditation of medical residency programs in the United States. The ACGME provides accreditation of residency programs in several medical specialty areas. Health centers seeking accreditation through ACGME are required to meet specific standards and guidelines which involve a thorough peer review process. One advantage of seeking accreditation through this Council is their knowledge of the HRSA THCGME Program; more details of this program are provided in the next section. They have dedicated a page on their site that includes a fact sheet, timeline for “application to

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<sup>3</sup> Morris, C.G. & Chen, F.M. (2009). Training residents in community health centers: Facilitators and barriers. *Annals of Family Medicine*, 7(6): 488-494.

submission,” steps in the process, etc. This detailed information can be accessed here:

<http://www.acgme.org/acgmeweb/tabid/335/GraduateMedicalEducation/HRSATHCGMEProgram.aspx>

**American Osteopathic Association (AOA)** – <http://www.osteopathic.org/>

- The American Osteopathic Association (AOA) is responsible for accrediting varying types of institutions and programs. This association is limited in medical specialty, as it only accredits Osteopathic medicine. However, it approves accreditation in Pre-doctoral and Postdoctoral Osteopathic training programs. A new approach was developed in structuring and accrediting postdoctoral programs which includes a community-based training consortium with a linkage to at least one college and one hospital. To learn more, visit AOA’s accreditation page:  
<http://www.osteopathic.org/inside-aoa/accreditation/Pages/default.aspx>

**Commission on Dental Accreditation (CODA)** – <http://www.ada.org/117.aspx>

- The American Dental Association has established the Commission on Dental Accreditation (CODA), a nationally recognized dental accreditation program. The accreditation provided by this association is tailored to dental and dental-related education programs. CODA has established new and revised accreditation standards. The site details these revisions, information on how accreditation works, review committee dates, and staff contact info by program area: <http://www.ada.org/100.aspx>

### **HRSA Teaching Health Center – Graduate Medical Education Program**

The Patient Protection and Affordable Care Act (ACA) of 2010 includes several provisions that specifically address the health care workforce and are designed to better meet the health care needs of the nation. These areas include: increasing the capacity of primary care delivery sites, increasing the quantity of health care staff, and improving health care workforce education and training.<sup>4</sup> Section 5508 of the ACA focuses on strengthening the infrastructure of the primary care workforce by providing grant funding to health centers to increase new and existing residency programs that provide Teaching Health Center Graduate Medical Education (THCGME). This section identifies the THCGME program as a way to “increase teaching capacity” and defines the THCGME program as a “supported primary care residency training program in any community-based setting (i.e. residency program in family medicine, internal medicine, pediatrics, obstetrics and gynecology, psychiatry, general and pediatric dentistry, and/or geriatrics) that provides graduate medical education.”<sup>5</sup>

The Health Resources and Services Administration (HRSA) has played an integral role in funding newly accredited or expanded THCGME programs. This funding component of Section 5508 provides payments to qualified THCs based on a formula per resident and number of full time-equivalent (FTE) for each individual health center, to cover direct and indirect medical expenses. Up to \$230 million has been appropriated for fiscal years 2011-2015.<sup>6</sup>

For more information on the Teaching Health Center Graduate Medical Education Program visit the following links:

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<sup>4</sup> Teitelbaum, J. (2011, January 5). Teaching Health Centers. *Health Reform GPS: Navigating Implementation*. Retrieved from <http://www.healthreformgps.org/wp-content/uploads/1.5.11-Teitelbaum-Teaching-Health-Centers.pdf>

<sup>5</sup> Health Resources and Services Administration (n.d.) *Teaching Health Center Graduate Medical Education (THCGME)*. Retrieved from <http://bhpr.hrsa.gov/grants/teachinghealthcenters/index.html>

<sup>6</sup> Ibid

- ACA Section 5508 (Statue): <http://bhpr.hrsa.gov/grants/teachinghealthcenters/section5508.html>
- THCGME Program Information: <http://bhpr.hrsa.gov/grants/teachinghealthcenters/thcgme2011.pdf>
- HRSA Technical Assistance Webinar Transcript:  
<http://www.hrsa.gov/grants/apply/assistance/TeachingHealthCenters/tacallsript.pdf>
- National HCH Council-Sponsored THC Webinar and Recording:  
<http://www.nhchc.org/2013/02/teaching-health-centers-seeking-accreditation-to-provide-graduate-medical-education/>

### Literature on Teaching Health Center Programs

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- Nandiwada, D.R. & Dang-Vu, C. (2010). Transdisciplinary health care education: Training team players. *Journal of Health Care for the Poor and Underserved*, 21, 26-34.
- Rieselbach, R.E., Crouse, B.J., Frohma, J.G. (2010). Teaching primary care in community health centers: Addressing the workforce crisis for the underserved. *Annals of Internal Medicine*, 152, 118-122.



P.O. Box 60427, Nashville, TN 37206 | (615) 226-2292

For more research and resources on Teaching Health Centers and promising practices around collaboration, contact Patrina Twilley at [ptwilley@nhchc.org](mailto:ptwilley@nhchc.org). For more information about our Research and Evaluation team and other projects at the National HCH Council, contact Dr. Darlene Jenkins at [djenkins@nhchc.org](mailto:djenkins@nhchc.org).