

Seeking Healthy Hearts

Health Care Extension Cooperative Aims to Enhance Primary Care

In a busy primary care practice, patients with acute problems come through the door one after another, each seeking relief for their current conditions.

That scenario, though now common in American medicine, doesn't leave much room for a physician's mission of caring for the broader range of a patient's needs, as well as the needs of those who haven't come through the clinic's door. Changing those circumstances requires strengthening the infrastructure of primary care in America, an area of little investment until recent years. Today, the OU College of Medicine is helping to lead that change.

Last year, the Agency for Healthcare Research and Quality, a component of the U.S. Department of Health and Human Services, awarded a \$15 million grant to Oklahoma, one of seven recipients nationwide, and together representing the largest research project in AHRQ's history. This year, Oklahoma is well underway on its project, called Healthy Hearts for Oklahoma. The project centers on a single research question: Can a health care extension cooperative speed the spread of evidence-based practice to primary care across the state?

"Doctors know the correct answers to the guidelines of medicine, but when we measure the outcomes of their practice, they're not doing what they know to do. Is that because the doctors are careless or sloppy? No, it's because they don't have a system to help their practice carry out those guidelines," said F. Daniel Duffy, M.D., principal investigator for Healthy Hearts. "The science of system change for this project requires a clinic's staff working with technology to implement evidence-based practices."

Healthy Hearts for Oklahoma represents the culmination of several threads and many decades of work in primary care by people like Duffy, from the School of Community Medicine on the Tulsa campus, and James W. Mold, M.D.,

now a professor emeritus of the College of Medicine. Notably, the project marks the establishment of the James W. Mold Oklahoma Primary Healthcare Improvement Cooperative. Mold's work with practice-based research networks demonstrated that practices and clinicians working together could translate research findings into practice. Mold also envisioned something broader: the health care equivalent of agriculture's Cooperative Extension program, a group that will help primary care practices implement change that improves patient care.

"That's the ultimate goal of this project – to prove the concept of the extension cooperative across the nation," said Steven Crawford, M.D., co-PI for Healthy Hearts and chair of the Department of Family and Preventive Medicine on the Oklahoma City campus.

To do so, researchers are addressing heart health, an area where Oklahomans' outcomes are particularly poor. Working with nearly 300 primary care practices across Oklahoma with 10 or fewer clinicians in each (many are one- or two-doctor practices), their aim is to achieve peak performance on the ABCs of cardiovascular risk reduction:

- The use of low-dose aspirin in high-risk patients
- Controlling blood pressure for patients with hypertension
- Cholesterol evaluation and use of statins when appropriate
- Asking all patients whether they smoke and, if they do, counseling on cessation

To help physicians incorporate those guidelines into the regular flow of their practices, Healthy Hearts is providing professional coaching and the technology to measure outcomes. Oklahoma's health information exchanges

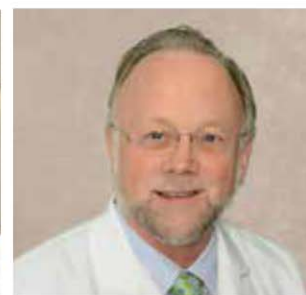
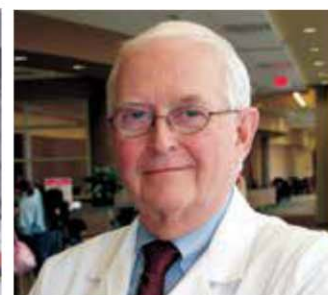
will collect measures of the outcomes, and the Oklahoma Foundation for Medical Quality will provide additional data. Practices will receive coaching from their health care peers in Oklahoma on how to leverage their existing electronic health records, as well as their staff's workflow, to carry out the guidelines.

"This is not a case of asking doctors and their staff to work more or work harder," Duffy said. "This is about changing their systems – delegating, distributing, creating standing orders and leveraging their electronic health record. We don't want doctors to become robots who are focused on carrying out guidelines. We train doctors to be thoughtful thinkers and problem solvers. If we have a system in place to carry out best practices, then our doctors can focus on what they do best, which is solving unique problems."

In addition to improving cardiovascular health, the Healthy Hearts project also could be considered a "boot camp" for value-based purchasing, which is on the mind of every primary care practitioner. "If we continue to pay on a fee-for-service basis, meaning we see lots of patients, but don't necessarily value the quality of care being given, it doesn't portend improving our dismal health care statistics in the United States," Crawford said.

For Duffy, Healthy Hearts for Oklahoma is the culmination of much of what he's worked toward in his career. As the former dean of the School of Community Medicine, he ushered in a school mindset that health is much more than an individual issue, and that patient-centered medical homes are crucial for enhancing patient care. In addition, the School of Community Medicine has played a significant role in the Comprehensive Primary Care Initiative, a program headed by the Center for Medicare and Medicaid Innovation. In the CPCI agreement, insurers join Medicare in making a per-member, per-month payment to participating primary care doctors (representing dozens of practices in the Tulsa area) to help them develop the infrastructure they need to provide patient-centered medical home care. In addition to that up-front agreement, insurers have committed to a shared savings program on the back end. The primary care clinics that reduce costs and reach quality targets get to split the savings. In year two of CPCI, Oklahoma's clinical practices were the only in the nation to achieve savings.

A final thread of Healthy Hearts for Oklahoma is the Oklahoma Clinical and Translational Science Institute, which provides a place within the OU Health Sciences Center to build the James W. Mold Oklahoma Primary Healthcare Improvement Cooperative. §



Left: William Collins, D.O., a second-year resident at the OU Health Sciences Center, visits with Angela McKibben, LPN, nurse manager at the Family Medicine Center. Collins serves as a professional coach for the Healthy Hearts for Oklahoma research project, which helps clinics integrate the ABCs of cardiovascular care into the flow of their practices.

Middle: Daniel Duffy, M.D.

Right: Steven Crawford, M.D.