**Title:** Interprofessional Faculty Development: Multi-cohort Evaluation of a Primary Care Fellowship

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## INTRO:

• In this educational research study, we review two years of evaluation data to examine the impact of a one-year faculty development fellowship curriculum in healthcare transformation, medical education, and leadership for physician assistants and physicians.

### **METHODS**

1. Nine primary care providers (three physician assistants and six physicians) participated in a yearlong, part-time fellowship. All completed a 45-question self-assessment and three well-being inventories prior to and after training. Fellows provided feedback on their learning experience through focus groups (6 and 12 months) along with completion of quarterly feedback forms. Pre and post-test responses were analyzed for any statistically significant change and focus group transcripts were analyzed for prevailing themes.

### **RESULTS**

- Increased knowledge and confidence was found in:
- collaborative care models in primary care,
- Facilitating learning for themselves, their clinical peers and other learners,
- the availability of local treatment services for those with substance use disorder; and
- resources to improve personal and organizational well-being.
- Qualitative themes included increased: knowledge in caring for patients with substance use disorder, application of quality improvement methodology in clinical settings, medical education skill, and advocacy planning at the practice and systems levels. Cohort 2 also reported that though in-person discussions were meaningful, a virtual experience (due to COVID-19) allows diversity in region and clinical settings that can enrich learning from each other.

# DISCUSSION

 This fellowship experience may be useful in growing clinical leaders and community primary care champions that include both physician assistants and physicians. By learning how population health, quality improvement, and integrated teambased care can strengthen primary care in a community, this training may mitigate gaps in care related to health disparities experienced by our most vulnerable and underserved patients.

An interprofessional fellowship for physician assistants can significantly improve knowledge and confidence in the topics of mental health, medical education, addiction and wellness.





# Results from significant self-assessment survey items, 2 cohorts (n=9)



How often do you refer patients to use mental health apps?

Mean Pre (Range)	Mean Post (Range)	Sig
1.56 (1-3)	3.22 (2-4)	0.004

How confident are you creating an individualized learning plan?

Mean Pre (Range)	Mean Post (Range)	Sig
1.78 (1-3)	3.00 (2-4)	0.016

How knowledgeable are you in creating a welcoming and safe learning climate?

Mean Pre (Range)	Mean Post (Range)	Sig
2.56 (1-4)	4.11 (3-5)	0.008

How knowledgeable are you about local treatment services and community resources for patient with substance use disorders?

Mean Pre (Range)	Mean Post (Range)	Sig
2.56 (1-4)	3.78 (3-4)	0.016

How knowledgeable are you about the Collaborative Care Model for the care of patients with mental illness?

Mean Pre (Range)	Mean Post (Range)	Sig
2.78 (1-4)	4.22 (4-5)	0.016

How knowledgeable are you about resources to improve your personal wellness?

Mean Pre (Range)	Mean Post (Range)	Sig
2.33 (1-4)	3.67 (3-5)	0.008

How knowledgeable are you about resources to improve the wellness of your organization (such as your clinical practice site)?

Mean Pre (R	Range) Mean I	Post (Range)	Sig
1.56 (1-	2) 2.8	89 (2-4)	0.008







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