




# Heart of Virginia Healthcare

*Restoring the joy in primary care.*



-  Heart of Virginia Healthcare is one of seven cooperatives in the country funded by the Agency for Healthcare Research and Quality's EvidenceNow initiative.
-  Offers a prestigious opportunity for Virginia primary care physicians to participate in a learning collaborative to improve quality, team function, patient satisfaction, and physician satisfaction.
-  Recruitment is on a rolling basis from June 19 – October 1, 2015.

## Partners



## Introducing the *Heart of Virginia Healthcare Collaborative*

The *Heart of Virginia Healthcare Collaborative* is a statewide initiative to help small-to-medium sized primary care practices incorporate patient-centered outcomes research (PCOR) findings in cardiovascular health, while also learning practical strategies that can strengthen their organizations and restore the joy to primary care practice. This is a physician-directed initiative produced by a partnership between four of Virginia's schools of medicine, the Virginia Center for Health Innovation, the Virginia Health Quality Center, George Mason University, and Community Health Solutions. The name of the collaborative reflects the core principles that heart health is a top priority for individuals and communities, and primary care is at the heart of effective healthcare.

## Background on the National Initiative: EvidenceNOW

The *Heart of Virginia Healthcare Collaborative* is part of an AHRQ grant initiative known as EvidenceNOW.

EvidenceNOW aims to transform health care delivery by building critical infrastructure to

help smaller primary care practices, which often do not have internal resources for quality improvement, apply the latest medical research in the care they provide. Aligned with broad U.S. Department of Health and Human Services efforts for Better Care, Smarter Spending and Healthier People and Million Hearts®, this initiative will focus on helping thousands of primary care practices use the latest evidence to improve the heart health of millions of Americans.



The goal of EvidenceNOW is to ensure that primary care practices have the latest evidence and that they use it to help their patients live healthier and longer lives.

EvidenceNOW establishes seven regional cooperatives composed of public and private health partnerships and multidisciplinary teams of experts. The cooperatives span 12 States that deliver health care in a range of metropolitan and rural settings and serve diverse populations. EvidenceNOW will ultimately reach over 5,000 primary care professionals serving approximately 8 million people.

## Value Proposition for Virginia Primary Care Practices

Practices that enroll in the *Heart of Virginia Healthcare Collaborative* will receive personalized coaching and consultation (at no charge) in order to bring improvements that will help them improve cardiovascular care while sustaining and revitalizing their practices in the new health care environment. The new environment will reward practices that can demonstrate value by improving health and managing costs for defined populations. Research and experience show that these challenges can be met by small to medium-sized practices if they know how to optimize their practice model and their practices culture.

Using cardiovascular care as a starting point, through this Collaborative we can help practices:

- **Restore the joy** in practicing primary care medicine and reduce burnout;
- Learn how to **improve team function** throughout the entire practice;
- Learn how to **implement open access scheduling** (if desired), which eliminates need for triage, enhances continuity, improves patient satisfaction, and usually adds capacity.
- Improve **quality** of care;
- Improve clinician, staff, and patient **satisfaction**;
- Improve **financial performance**;
- Improve their ability to negotiate for and receive **pay for performance bonuses**;
- Complete **Part IV certification** by the ABFM and ABIM for QI work completed in this initiative;
- Engage in a **self-sustaining learning collaborative** of similar practices after the end of the project;



## What Types of Practices Are Eligible?

The intent of the national EvidenceNOW Initiative and the *Heart of Virginia Healthcare Collaborative* is to provide support and capacity building to small and medium primary care practices that typically do not have internal resources for quality improvement and change management. While these practices may have administrative relationships with other practices or organizations for purposes such as billing or purchasing, the practices sought for this initiative are independent in their clinical and administrative governance, clinical protocols, and quality improvement efforts.

For the purpose of this initiative, AHRQ defines small and medium practices as organizations or offices that consist of 10 or fewer lead clinicians (physicians, physician assistants, and nurse practitioners). Community Health Centers with 10 or fewer lead clinicians may be included. Multi-specialty practices that provide primary care and which have ten or fewer total lead clinicians may also be included.

Applicants may propose to serve small and medium-sized primary care offices of larger organizations, including out-patient primary care offices of hospital systems or academic health centers, larger community health center networks, multi-office groups or other organizations, if the applicant demonstrates that the offices do not receive significant quality improvement support.

**All participating practices for the Virginia Collaborative must have an EHR.**

## What Will Be Required of Participating Practices?

Because this is part of a national program, AHRQ wants to track what is happening during the project in order to learn what works and what doesn't work. Your obligations, if you participate, include:

- Having two practice members (physician champion and head nurse or practice manager) attend a one-day kickoff training event (mileage and lodging will be reimbursed);
- Participating in a six-month long active coaching intervention, where there will be regular meetings with practice coaches (weekly at first and then monthly later in the intervention) and conference calls with faculty (weekly);
- Completing the Maslach Burnout Inventory – administered to every clinician three times, at baseline, at the end of 2016 and the end of 2017 (reimbursement of \$50 per completed survey).
- Complete a survey designed to learn what functions you utilize with your EHR – administered to every clinician three times, at baseline, at the end of 2016, and the end of 2017 (reimbursement of \$50 per completed survey).
- Complete a survey designed to assess practice culture and change capacity -- administered to every clinician three times, at baseline, at the end of the active intervention for all groups, and at the very end (reimbursement of \$50 per completed survey).
- Complete a survey assessing which elements of the collaborative experience – from practice coaching to timely and focused webinars – were most valuable to each practice. This survey will be administered to each clinician twice, at the halfway point and at the conclusion of the active intervention period (reimbursement of \$50 per completed survey).
- Complete and report practice level meaningful use measures related to heart health at baseline and then quarterly for two and a half years (payment of \$250 per completed report).
- A small number of clinicians may be asked to participate in an in-depth interview or focus group to learn more about what about this project was most helpful and what was less so.

## How Can A Practice Apply?

Applications will be available beginning June 19, 2015 on the Virginia Center for Health Innovation's website here: [www.vahealthinnovation.org/hvh](http://www.vahealthinnovation.org/hvh)

Selections will be made on a rolling basis until all available slots are filled by October 1, 2015.