



## National Center for Excellence in Primary Care Research

The National Center for Excellence in Primary Care Research (NCEPCR) is the intellectual home for primary care and primary care researchers across AHRQ.

NCEPCR communicates the evidence from AHRQ's research—and how this evidence can be used to improve health and primary health care—to researchers, primary care professionals, health care decisionmakers, and patients and families.

The Center also provides opportunities for AHRQ scientists to share concepts, ideas, challenges, and emerging solutions.

### Primary Care Research Initiatives



Grants to Increase Access to Medication-Assisted Treatment of Opioid Abuse in Rural Primary Care Practices

Increasing Access to Medication-Assisted Treatment in Rural Primary Care Practices is an AHRQ-funded demonstration research (R18) initiative that will implement medication-assisted treatment (MAT) for opioid use disorder in primary care practice in rural areas of the United States. Through an investment of approximately \$9 million over 3 years, this initiative will discover and test solutions to overcoming known barriers to providing MAT in primary care, create training and implementation resources, and ensure access to this evidence-based therapy across America's rural communities. The practices involved in the initiative will provide access to MAT to over 20,000 individuals struggling with opioid addiction

using innovative technology, including patient-controlled smart phone apps, and remote training and expert consultation.

The grant recipients are:

1. The American Institutes of Research in partnership with the State of Oklahoma, Project ECHO from New Mexico, and expert consultants from the American Society for Addiction Medicine. Led by Dr. Susan Heil, this project will build on efforts already underway in Oklahoma to address opioid abuse, including the development of pain treatment guidelines, public awareness campaigns, support for distribution of medication that blocks the high from opioid abuse, and the creation of community-based comprehensive community addiction recovery centers. This project will expand access to thousands of people living in 28 rural counties, engage hundreds of physicians and their teams in ongoing training, and produce training materials to assist other rural communities and primary care practices.
2. The University of Colorado, Denver. Under the leadership of Dr. Jack Westfall, a family physician who recently was certified to provide MAT, this project will expand access to MAT across 24 counties in eastern and southern Colorado. Using a multi-pronged approach, the team will provide primary care practices with comprehensive training and support for delivery of MAT in their rural primary care practices using face-to-face practice coaching and an ECHO tele-training model. This project will also include a comprehensive evaluation and the development of resources to allow other States and primary care practices to expand access to MAT.
3. The Pennsylvania State Department of Human Services in partnership with the Pennsylvania Office of Mental Health and Substance Abuse Services and the University of Pittsburgh. Led by Dr. Dale Adair, the ambitious goal of the project is to double the number of primary care physicians delivering high-quality MAT in 23 rural Pennsylvania counties, with a special focus on people covered by Medicaid. The grant will blend onsite practice support with online physician MAT training with ongoing expert teleconsultation and expanded access to tele-psychiatry services to people with opioid abuse disorders living in rural communities. This grant also has a multi-faceted plan for evaluation and disseminating findings to State and national stakeholders.

EvidenceNOW: Advancing Heart Health in Primary Care

**EvidenceNOW: Advancing Heart Health in Primary Care** is an AHRQ initiative to transform health care delivery by building a critical infrastructure to help smaller primary care practices apply the latest medical research and tools to improve the heart health of their patients.

**Primary Care Transformation**

AHRQ funded three grant initiatives to identify the difficulties faced by primary care practices as they transform into patient-centered medical homes (PCMHs) and to help create an infrastructure to assist them. **Transforming Primary Care Practice grants** studied the processes that primary care practices undertake as they transform into PCMHs. **Infrastructure for Maintaining Primary Care Transformation (IMPACT) grants** funded State-level initiatives that provided a quality improvement infrastructure for primary care through primary care extension agents. **Estimating the Costs of Supporting Primary Care Practice Transformation** grants provided stakeholders with information about the costs of implementing and sustaining transformative primary care practice redesign.

## Practice-Based Research Networks

**Centers for Primary Care Practice-Based Research and Learning.** AHRQ funded grants to establish these eight Centers. These collaborative centers are designed to examine innovative ways to improve the delivery and organization of primary care and to improve quality overall in primary care practices. The Centers nurture partnerships, conduct research, and disseminate knowledge to improve patient care.

**Practice-based Research Network Resource Center.** The PBRN RC features a searchable registry of PBRNs and highlights of thematic areas of expertise and research interest among PBRNs. Well-received research tools and recorded training presentations on managing and research methods for PBRNs, are available on PBRN playlist on AHRO's Primary Care YouTube Channel.

## Improving Primary Care

Primary care is the cornerstone of effective and efficient health care that meets the needs of patients, families, and communities. Our primary care system currently has significant—and perhaps unprecedented—opportunities to emphasize quality improvement (QI) and practice redesign in ways that could fundamentally improve health care in the United States. To ensure the success of these efforts, it is necessary to build and sustain the ability of primary care practices to engage in QI activities continuously and effectively.

### Initiatives



**The Patient-Centered Medical Home Resource Center** provides policymakers and researchers with access to evidence-based resources about the medical home and its potential to transform primary care and improve the quality, safety, efficiency, and effectiveness of U.S. health care.



**The Academy for Integrating Behavioral Health and Primary Care**. AHRQ's Academy for Integrating Primary Care and Behavioral Health is a national resource center for people committed to providing comprehensive, integrated health care.



**TeamSTEPPS Primary Care Version**. The primary care version of TeamSTEPPS (Team Strategies & Tools to Enhance Performance and Patient Safety) adapts the core concepts of the AHRQ/DoD TeamSTEPPS training and support program to work for primary care office-based teams. The examples, discussions, and information are tailored to primary care.

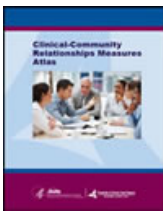
## Tools



**Care Coordination Measures Atlas**. Care coordination is the active synchronization of patient care activities between two or more participants (including the patient) involved in a patient's care to help deliver appropriate health care services. This **Atlas** profiles more than 60 health care coordination measures designed to assess the experiences of patients and families, health care professionals, or system representatives, with a focus on primary care setting.



**Atlas of Instruments to Measure Team-based Primary Care**. Team-based care is an important component of many models of primary care transformation. The Atlas is designed for quality improvement (QI) practitioners responsible for primary care team QI initiatives, evaluators of interventions or initiatives to improve primary care teams, and researchers studying team-based primary care.



**Clinical-Community Relationships Measures Atlas**. The CCRM Atlas provides a framework for understanding the measurement of clinical-community relationships for researchers, evaluators, and primary care clinicians seeking guidance on using such relationships to provide preventive and other services with the aim of improving individual and population health.



**Health Assessments in Primary Care: A How-to Guide for Clinicians and Staff**. Obtaining periodic health assessments on patients provides an opportunity for primary care teams to get an overview of a patient's health status and health risks. This guide provides practical evidenced-based primary care teams to successfully adopt health assessments in primary care practices.

**Integrating Chronic Care and Business Strategies in the Safety Net: A Practice Coaching Manual**. Practice coaching can be an effective way to improve health care quality. This practice coaching manual can help improve clinical quality in an ambulatory health care setting. The manual accompanies a comprehensive Web-based toolkit, **Integrating Chronic Care and Business Strategies in the Safety Net: A Toolkit for Primary Care Practices and Clinics**.

**Oral, Linguistic, and Culturally Competent Services**. To address shifting demographic trends in health care, two guides offer approaches to defining cultural needs in managed care and developing appropriate services for them. The Centers for Medicare & Medicaid Services (CMS) commissioned both guides, which were developed by a contractor of the Agency for Healthcare Research and Quality (AHRQ).

**Self-Management Support Resource Library**. These resources can help primary care teams learn about self-management support and help them help their patients develop self-management skills. The library includes articles, guides, patient information, reports, tools, and training materials.

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Internet Citation: National Center for Excellence in Primary Care Research. Content last reviewed July 2016. Agency for Healthcare Research and Quality, Rockville, MD.  
<http://www.ahrq.gov/professionals/systems/primary-care/index.html>