

# STRONG CHILDREN'S RESEARCH CENTER

## Summer 2012 Research Scholar

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### ABSTRACT

**Title:** *Barriers and Facilitators to Becoming Patient Centered Medical Homes within Community Health Centers in New York State*

#### **Background:**

Federally Qualified Community Health Centers (FQCHCs) are non-profit health organizations that provide comprehensive primary care and preventive care services in underserved urban and rural communities. Although federal funding has allowed FQCHCs to provide healthcare to more than 20 million people nationwide, recent studies have revealed several challenges to delivering high quality healthcare. The Patient Centered Medical Home (PCMH) has emerged as a model to improve primary healthcare delivery. Primary care providers, however, struggle to implement PCMH standards. What is unknown is the degree to which FQCHCs are meeting PCMH standards, as well as major barriers and facilitators to successfully implementing PCMH standards within FQCHCs in New York State (NYS).

#### **Objective:**

To explore barriers and facilitators in achieving successful medical home transformation under the PCMH model within FQCHCs in NYS.

#### **Results:**

Survey responses from a total of 17 Office Managers and 22 Medical and/or Executive Directors were included in data analysis. Office managers completed a quantitative survey regarding baseline demographics, and Medical and/or Executive Directors filled out a survey with additional open-ended questions regarding their perceptions and experiences becoming a PCMH. 2 FQCHCs achieved Level 1 PCMH designation, while 1 FQCHC achieved Level 2 designation. 15 FQCHCs have achieved Level 3 designation. Currently, 4 FQCHCs are in the process of applying for PCMH designation. 71% were urban and 29% were rural. Some of the major themes that emerged from the open-ended questions included issues around clinician shortage, incentives/buy-in, and patient literacy and education. The top three reported barriers that prevent FQCHCs in achieving PCMH standards include time limitations, ancillary staff shortages, and electronic medical record limitations. The top three reported facilitators that would sustain each standard of the PCMH model in FQCHCs include utilization of ancillary staff, improving EMR capabilities, and enhancing staff capabilities.

#### **Conclusion:**

The most commonly reported the barriers that prevent FQCHCs from achieving PCMH standards included time limitations, ancillary staff shortage, and EMR limitations. In order to sustain PCMH standards, FQCHCs most commonly reported utilization of ancillary staff, improving EMR capabilities, and enhancing staff capabilities as facilitators.