Achieving the Triple Aim: A Curriculum Framework for Health Professions Education

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The 2014 Clinical Prevention and Population Health Curriculum Framework in this issue of the American Journal of Preventive Medicine1 is described as a resource for preparing health professionals to achieve the Triple Aim: improving the patient experience of care, reducing the per capita cost of care, and improving the health of the population. The strengths of the Framework in guiding health professions education are described and the consensus-based process that included members from major health professional organizations to develop the Framework is discussed. Links are provided to examples illustrating the Framework’s use in health professions educational settings.

Introduction

The U.S. healthcare system is changing, stimulated by dissatisfaction with poor outcomes and high costs. The Triple Aim goals—improving the patient experience of care, reducing the per capita cost of care, and improving the health of the population2—define the direction of change. Achieving these goals will require significant change in health professions education. There is agreement that future healthcare providers will need excellent clinical knowledge, solid grounding in health promotion and disease prevention, the ability to use evidence-based guidelines, and the competencies required for practice in interprofessional teams. A curriculum is required that enables health professionals to use the knowledge and skills of public health to think in terms of populations while using clinical skills, emphasize prevention while treating acute and chronic conditions, and understand the implications of health policy while dealing with its impact on current and future patients.

In 2004, the Association for Prevention Teaching and Research (APTR) Healthy People Curriculum Task Force (HPCTF) created a framework for just such a curriculum: the Clinical Prevention and Population Health Curriculum Framework. The HPCTF, established in 2002 by the APTR, has members who represent the disciplines of allied health, allopathic and osteopathic medicine, dental medicine, pharmacy, physician assistant studies, public health, and undergraduate and advanced practice nursing.6 The work has focused first on defining health promotion and disease prevention and then on increasing the proportion of health professional schools that incorporate this educational content into their curricula. Since the release of the original Framework, a majority of the health professional schools have included Framework elements in their accreditation structure, didactic curricula, and experiential learning opportunities.6 Changes in our health system nationally have resulted in updates to the HPCTF Curriculum Framework that enable health professions educators to look forward and keep pace with these system changes. The first update was completed in 2009; now, a new update is ready for use. This paper describes the 2014 Framework’s purpose: to function as a guide for strengthening the focus of health professions education and accrediting bodies on prevention and population health, essential components of the Triple Aim.

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1The member organizations of the APTR HPCTF are: American Association of Colleges of Nursing, American Association of Colleges of Osteopathic Medicine, American Association of Colleges of Pharmacy, American Dental Education Association, Association of American Medical Colleges, Association of Schools of Allied Health Professions, National Organization of Nurse Practitioner Faculties, Physician Assistant Education Association. Resource organizations: Community–Campus Partnerships for Health, Association of Schools and Programs of Public Health.

2Examples of these curriculum innovations are provided on the APTR website: www.aptrweb.org/?SuccessfulPractices.
Background
The healthcare landscape has changed during the 10 years since the initial version of the Curriculum Framework as evidenced by

1. increased focus on population health through the publication of the Triple Aim in 2008 and the passage of the Patient Protection and Affordable Care Act in 2010;
2. proliferation of patient-centered medical homes and accountable care organizations that require health workers who understand how to use these delivery strategies to improve population health;
3. release in 2011 of the Core Competencies for Interprofessional Collaborative Practice from the Interprofessional Education Collaborative, which further emphasized the importance of interprofessional training opportunities and acknowledged a need for a population-oriented focus for healthcare teams;
4. federal advisory committee recommendations to the Secretary of the DHHS urging health professions licensing bodies to “…measure entering health professionals’ understanding of population health and their ability to integrate population health strategies into practice.” This same document encourages the Health Resources and Services Administration in the DHHS to support funding to increase a population health focus in the curricula of health professions education programs; and
5. the challenge to academic health centers to embrace disruptive change and assume a leadership role in increasing curricula’s population health content.

In recognition of these trends, the 2014 version of the Curriculum Framework expands to include more significant educational content in population health. This version incorporates input not only from HPCTF members but also from members of the Framing the Future–Population Health in All Professions Expert Panel, a group convened in 2014 by the Association of Schools and Programs in Public Health as part of its Framing the Future Task Force. Both groups share the goal of improved health outcomes through attention to prevention and population health in clinical education and practice.

Educational Impact of the Framework and Task Force Contributions
Since its release in 2004, the Framework has been used by programs to guide curriculum design. Another significant accomplishment of the HPCTF has been the sustained, ongoing dialogue among multiple health professions’ educators. This dialogue has been essential to development of a quality Framework suitable for health professions. In addition, the unique nature of this collaboration has been critical to the Framework’s adoption in accreditation standards, licensure exams, and certification requirements, as well as to an increased emphasis on these important areas of focus in the work of interprofessional teams. For example, the American Association of Medical Colleges identified the Framework as one of the references to guide improvement of population health education in medical schools and residency programs. The American Association of Colleges of Osteopathic Medicine reflects Healthy People 2020 curriculum objectives in the osteopathic medical core competencies. The American Association of Colleges of Nursing, the Center for Advancement of Pharmaceutical Education, and the Accreditation Standards for Physician Assistant Programs all include training in population health as a key component for educational programs in their disciplines. Additional specific examples are provided in the Curriculum Framework appendices available at the APTR website (www.aptrweb.org/?page=CPPH_Framework). Specific references to the Framework and incorporation of population health objectives in accreditation standards attest to the importance of the topic and the Framework in health professions education.

The 2014 Revision of the Curriculum Framework
The Task Force felt that the Framework’s Clinical Preventive Services and Health Promotion as well as the Health System and Health Policy components had stood up well with time and warranted only modest revision; thus, they are largely unchanged. More substantive changes, including a change in title, were made in the remaining two components. Regarding the title change, no longer is one entire section devoted to a topic titled Evidence-Based Practice. Cognizant of the potential for this to be viewed as limited to the level of one-on-one clinical interaction, the Task Force changed the title to Foundations of Population Health, with the topic of Descriptive Epidemiology: the Health of Populations subsumed under it. Also newly specified within this component are references to social determinants of health and improving the health of populations, with the result clearly being that healthcare professionals begin to consider how they will contribute to both identifying and helping to effect change in the determinants of health. Additionally, in this revision, Evaluation has become a full topic as opposed to being included under a category and Population Health Informatics is a
new addition. Although the 2009 version included the idea of Population Health, it had been paired with Community Aspects of Practice. The 2014 revisions results in that segment being retitled as Incorporating Population Health into Clinical Care. The Task Force saw this change as explicitly strengthening the learners’ need to understand how populations and individuals are linked. Additionally, within this category, a newly named topic, Partnering with the Public to Improve Health, captures recent landscape changes that call for increased collaboration across boundaries. The Task Force expanded this newly named topic to include areas such as understanding community-engaged research and engaging patients in reviewing health information. Finally, reflecting a continued national focus on preparedness, newly added to this category is the topic of Emergency Preparedness and Response Systems.

Overall, the revised version also includes numerous resources and examples of how the Curriculum Framework has been used in developing accreditation standards, curricula, and practical experiences for health professional programs (Figure 1).

Conclusions

The 2014 Clinical Prevention and Population Health Curriculum Framework is a resource to equip future health professionals with the knowledge and skills needed to achieve the Triple Aim. The Framework can also be used to facilitate collaboration between campus-based faculty and community-based clinicians to increase their population health skills and their contributions to the achievement of the Triple Aim.

The Curriculum Framework is the result of a long-standing, consensus-based partnership of health professions educators who collaborate in preparing the Framework as well as in outlining its importance to the health professions. The result of this collaborative work is a Curriculum Framework that can support transformative change in health professions education and healthcare delivery in the U.S. through shared curriculum standards that build a common platform for the education of health professionals. In the future, the Framework can form the basis for shared evaluation of educational outcomes and the impact of interdisciplinary healthcare teams.

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References


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