



## THE KRESGE FOUNDATION

### **PRAPARE Train the Trainer Academy: Building Capacity to Spread and Use PRAPARE**

#### **Request for Applications**

#### **Overview Information**

Between 2013 – 2016, the National Association of Community Health Centers (NACHC) collaborated with the Association of Asian Pacific Community Health Organizations (AAPCHO), the Oregon Primary Care Association (OPCA), and the Institute for Alternative Futures (IAF) to develop one of the first national standardized assessment protocols that allows providers to collect patient-level data on the social determinants of health in the Electronic Health Record (EHR). It is known as PRAPARE for the Protocol for Respond to and Assessing Patients' Assets, Risks, and Experiences ([www.nachc.org/prapare](http://www.nachc.org/prapare)). Over three years, national PRAPARE partners developed the assessment tool; worked with four health center/health center network teams to develop free EHR PRAPARE templates for eClinicalWorks, NextGen, GE Centricity, and Epic; tested the tool in health center workflow; and packaged the lessons learned, workflow models used, and interventions in a PRAPARE Implementation and Action Toolkit. To help spread PRAPARE, national PRAPARE partners are currently testing it in other populations, in different state environments, and in other EHR systems, including Greenway Success EHS, Greenway Intergy, Allscripts, Athena, and Meditab.

To support the rising demand for training on PRAPARE implementation and use, NACHC, AAPCHO, and OPCA are launching the first ever PRAPARE Train the Trainer Academy that will function as a shared learning opportunity between participants.

The goals of the PRAPARE Train the Trainer Academy are to:

- 1) Build the capacity of health center member organizations (e.g., state Primary Care Associations (PCAs), Health Center Controlled Networks (HCCNs), etc.) to assist their health centers in PRAPARE implementation, spread PRAPARE throughout their states, and use PRAPARE to affect change at the patient, organization, and community levels;
- 2) Build capacity of health center member organizations to use PRAPARE data to accelerate policy, payment, and delivery system changes; and
- 3) Cultivate leaders in PRAPARE implementation that can accelerate spread and serve as a resource for other PCAs and HCCNs.

Key capacity areas covered in this Academy include:

- 1) Strategies to Support Health Center Members in PRAPARE Implementation
- 2) HIT Functionalities for PRAPARE Data

- 3) Supporting Health Centers in Responding to Needs Identified
- 4) Using Data for Policy, Delivery System Redesign, Broadly-Based Integration, and Care Transformation<sup>1</sup>
- 5) Tracking best practices to create resources to help other PCAs and HCCNs and support spread within participant states.

Participation in the PRAPARE Train the Trainer Academy will be free. Selected applicants will participate in a ten-month, interactive collaborative training academy from national PRAPARE project partners and early PRAPARE adopters with opportunities to network and learn from others. Trainings will be composed of both in-person and virtual trainings, with Academy participants meeting monthly (mostly via webinar). In-person trainings will coincide with NACHC's conferences, kicking off with a day-long in-person training on Thursday, August 24<sup>th</sup> in San Diego before NACHC's Community Health Institute. Over the course of ten months, Academy participants will work with at least two of their health center members to complete key milestones to spread PRAPARE, to build capacity to collect and aggregate data, and to develop plans for using PRAPARE data for state policy and transformation initiatives. Participants will learn best practices and replicable models that they can apply with other health center members in their state or region. See Draft Curriculum and Participant Expectations below for more detail.

National PRAPARE project partners will select anywhere between 6 – 8 applicant teams for each round of the PRAPARE Train the Trainer Academy. Round One will occur between August 2017 – May 2018 and Round Two will occur between August 2018 – May 2019. **Applications for Round One are due Friday, June 16, 2017 by midnight EST.** A call for Round Two applicants will be released next calendar year. See Round One application form below.

## Key Dates

- Deadline for Applications: Friday, June 16<sup>th</sup> at midnight EST
- Kick-off In-Person Day-Long Meeting: Thursday, August 24<sup>th</sup> in San Diego before NACHC's Community Health Institute
- Save the Date: afternoon of Wednesday, November 15<sup>th</sup> in Austin, TX for our second in-person training to focus on HIT Functionalities after NACHC's PCA/HCCN Conference

## Eligibility Information

Any organization that works with health centers is eligible to apply as long as it meets the criteria below. However, if an applicant organization is not a Primary Care Association (PCA) or a Health Center Controlled Network (HCCN), it is strongly encouraged that the applicant organization partner with a PCA and/or a HCCN to accomplish the goals of this Academy as stated above and in the participant expectations stated below. Similarly, a PCA applicant organization may need to

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<sup>1</sup> Please note that the PRAPARE Train the Trainer Academy will not cover how to create an alternative payment model in your state.

bring on a HCCN as a partner and vice versa in order to accomplish the goals and meet participant expectations. **A signed Memorandum of Understanding (MOU) between all partner organizations on the applicant team is required stating that this Academy is in alignment with all of their organizational strategic plans and that they agree to commit the in-kind time required to participate in all trainings and complete milestones.**

Successful Applicants will meet the following requirements, although organizations with varying state contexts and capacities are encouraged to apply:

- 1) Work directly with Federally-Funded or Federally Qualified Health Centers that serve a diverse population with different social determinant needs
- 2) Willing to work with at least two of their health center members to apply lessons learned in the collaborative training academy on the ground and to understand these health centers' individual and common workflows, needs, and contexts. Health centers ideally would use the following Electronic Health Records (EHR) systems that already have PRAPARE templates: eClinicalWorks, Epic, GE Centricity, or NextGen. If an applicant organization's health center members use a different EHR template, the applicant organization must detail plans for building and/or finalizing free PRAPARE EHR templates for their health center members by September 2017. As a reminder, PRAPARE EHR templates are still in the process of being built for the following EHRs: Greenway Success EHS, Greenway Intergy, Meditab, Allscripts, and Athena.
- 3) Engaged in a strategy or initiative to improve population health at the state level
- 4) Possess capabilities and infrastructure to aggregate and analyze PRAPARE data from health centers' EHRs (but skills and experience not required)
- 5) Possess demonstrated policy experience
- 6) Committed to contributing in-kind resources as a collaborative team necessary to complete milestones
- 7) Able to have key staff actively participate and share experiences, resources, and lessons learned with other participating organizations and project staff
- 8) Well-positioned to disseminate PRAPARE to more health centers upon the Academy's conclusion
- 9) Able to apply PRAPARE data with other initiatives (care and/or delivery system transformation efforts, payment reform efforts, etc.)
- 10) Create one Memorandum of Understanding (MOU) signed by all partner organizations on the applicant team stating that this Academy is in alignment with key organizational strategic plans and that they agree to commit the in-kind time required to participate in all trainings and milestones

## **Participant Expectations**

Participating teams will each commit to do the following:

- Commit the participation of at least 2 - 3 staff per applicant team (not including health centers) throughout the entirety of the ten-month long PRAPARE Train the Trainer Academy. At a minimum, staff should be able to demonstrate (as an aggregate team) the

following core responsibilities and expertise:

- Staff with decision-making authority (not necessarily C-suite staff but also departmental directors, etc.)
  - Quality Improvement Training (e.g., Director of Community Health Services, Quality Director, Population Health Manager, etc.)
  - IT and/or data reporting, analysis, and use (e.g., IT staff, Data Analyst, Informaticist, etc.)
- Commit to working with at least two health center members during the duration of the PRAPARE Train the Trainer Academy to apply lessons learned on the ground. **A signed Memorandum of Understanding between all partner organizations is required.**
  - Complete the PRAPARE PCA Readiness Assessment prior to the kickoff meeting on August 24<sup>th</sup> and at the end of the project and share the results of the readiness assessments with PRAPARE project staff. The Readiness Assessment will be shared at least two weeks prior to this meeting.
  - Attend the in-person day-long kickoff meeting in San Diego on Thursday, August 24<sup>th</sup>, 2017. Travel is not covered for participants.
  - Actively participate in all trainings and virtual shared learning meetings, sharing their experiences, challenges, and lessons learned. This includes the in-person kickoff meeting in San Diego in August, approximately 4 - 6 virtual shared learning trainings (60 - 90 minute webinars), one half-day in-person training in Austin, TX In November 2017 in conjunction with NACHC's PCA/HCCN Conference, and potentially one final in-person training or Harvest Meeting in Washington, DC in March 2018 in conjunction with NACHC's Policies and Issues Conference. **Travel is not provided. It is expected that at least two team members attend each training, including in-person training to help facilitate shared learning within each team and across teams.**
  - Complete the milestones in between meetings to apply what they learn on the ground with health centers. Example milestones include:
    - Develop plans and coaching models for training participating health centers in PRAPARE implementation.
    - Build capacity and infrastructure to collect and aggregate PRAPARE data across health centers.
    - Develop innovative strategies and resources to use PRAPARE data for multi-level purposes, such as dashboards for population health management, templates to inform policy and payment, etc.
  - Participate in an evaluation to understand and share best practices and lessons learned for future PRAPARE implementation and training efforts. The evaluation will likely include repeating the Readiness Assessment, completing a short survey, and participating in a "harvest" discussion.

## Anticipated Curriculum

This curriculum is subject to change based on applicants' level of readiness, their input, and their documented experiences as learned from their application submissions. Trainings will be led by national PRAPARE project staff as well as the health centers, PCAs, and HCCNs who were early adopters of PRAPARE.

Key Capacity Area	Training and Shared Learning Topic	Training Type	When	Milestones
Strategies to Support Health Center Members in Implementing PRAPARE	<ul style="list-style-type: none"> <li>● Orientation to Academy</li> <li>● Understanding the importance of social determinants and PRAPARE</li> <li>● Messaging PRAPARE and engaging stakeholders</li> <li>● Strategizing implementation plans</li> <li>● Developing workflow models</li> <li>● Best practices in T/TA for health centers on PRAPARE</li> </ul>	In-person day-long training in San Diego in conjunction with NACHC's Community Health Institute	Thursday, August 24, 2017	Develop plans and coaching models to train health centers in implementing PRAPARE
Strategies to Support Health Center Members in Implementing PRAPARE	<ul style="list-style-type: none"> <li>● EHR Functionalities and HIT Workflow on how PRAPARE data flows from an HIT perspective</li> </ul>	Virtual Webinar	September 2017	Train and support health centers
Supporting Health Centers in Responding to Needs	<ul style="list-style-type: none"> <li>● Supporting Health Centers in Responding to Needs from a State-Level through Interventions, Community Partnerships, and Funding</li> <li>● Tracking Interventions</li> </ul>	Virtual Webinar	October 2017	Train and support health centers
HIT Functionalities for Data Aggregation and Analysis	<ul style="list-style-type: none"> <li>● PRAPARE EHR Template Functionalities</li> <li>● Understanding Data Strategy</li> <li>● Reporting Data</li> <li>● Options for Aggregating Data</li> <li>● Analyzing Data</li> </ul>	In-person 3- 4 hour training afternoon NACHC's PCA/HCCN Conference concludes in Austin, TX	November 2017 (most likely Wednesday, November 15 <sup>th</sup> in the afternoon)	Build HIT capacity to aggregate and analyze data if able
Shared Learning Knowledge Application	<ul style="list-style-type: none"> <li>● Share lessons learned from training health centers and building HIT capacity to aggregate and analyze data</li> </ul>	Virtual Webinars	December 2017 – February 2018	Continue to train and support health centers. Begin aggregating and analyzing data if able.
Using PRAPARE Data for Policy, Delivery System Redesign, and Transformation	<ul style="list-style-type: none"> <li>● Using PRAPARE data for policy and payment reform</li> <li>● Using PRAPARE data for population health</li> <li>● Using PRAPARE data for</li> </ul>	Either in-person training as part of NACHC's Policies and Issues Conference in Washington, DC or as separate monthly	March – April 2018	Continue to train and support health centers. Begin aggregating and analyzing data if able.

	care and delivery system transformation <ul style="list-style-type: none"> <li>Using PRAPARE data for partnerships and community-level change</li> </ul>	webinars		
Harvest Meeting	<ul style="list-style-type: none"> <li>Harvest best practices and lessons learned to inform second round of Train the Trainer Academy</li> </ul>		May 2018	Have plans and/or resources to use PRAPARE data (messaging, dashboards, templates, etc.)

### **Application and Submission Information**

Applications are due on Friday, June 16<sup>th</sup> at midnight EST. Applications must be no longer than 5 pages in length (not including the 1-2 page Memorandum of Understanding). Applicants may type their answers to the application questions below on a Word or PDF document.

Organizations must submit applications via email to [prapare@nachc.org](mailto:prapare@nachc.org) with the subject heading “Application for PRAPARE Train the Trainer Academy”. Applicants will receive an email confirmation within 24 hours (or the next business day) of their submission.

### **Anticipated Announcement and Award Dates**

Applicants will be notified via email whether they were selected to participate in the PRAPARE Train the Trainer Academy during the week of June 26, 2017.

### **Application Submission Contact:**

Please direct all questions to the following:  
 Shelkecia Lessington  
 PRAPARE Project Specialist  
 National Association of Community Health Centers  
 202-331-4617  
[prapare@nachc.org](mailto:prapare@nachc.org)

Questions will be answered in a Frequently Asked Questions document that will be posted on our website at [www.nachc.org/prapare](http://www.nachc.org/prapare) under the PRAPARE Train the Trainer Academy section.

## **APPLICATION FORM**

Please fill out the following application by answering the general and specific bulleted questions below in a Word or PDF document no more than 5 pages long (not including Memorandum of Understanding).

### **Organizational Description and Capacity**

- Organizational Description**

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Brief description of the organizations involved in your application (including the two health centers applicant organizations you will work with to apply lessons learned on the ground) and your collective member base, including contact information for key participating staff. Also include data about your membership, such as number of health center members, patient size and mix, and provider size as well as EHR(s) used.

- **Partnerships**

Brief description of relevant partnerships that are not exclusively a part of this application but are important in regards to data aggregation and analysis, delivery system transformation, social and community services, payment reform, and/or health services research.

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- **Goals – “Why is this PRAPARE Train the Trainer Academy important to your team?”**

Brief description of what you hope to gain from participating in this collaborative training Academy and why it is important to your organization(s). Please describe both short-term and long-term goals for participating in this Academy. Are there curriculum and discussion topics that you think should be added?

**Strategic Plan – “What parts of your organizations’ strategic plans is the PRAPARE Train the Trainer Academy associated with?”**

List which element(s) of your strategic plan this PRAPARE Academy relates to. What other initiatives do you have happening at this time that PRAPARE could add value to? Is your organization supporting your members in using other patient social risk assessments (e.g., PAM, ACE, etc.)?

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**Infrastructure and Experience**

- **Readiness, Infrastructure, Capacity, and Experience – “What is your team’s experience related to the participant expectations of the PRAPARE Train the Trainer Academy?”**

**Experience with Social Determinants, PRAPARE, and/or Tracking Enabling Services**

Please describe your experience collecting social determinants of health data (using PRAPARE or through other means), your experience responding to socioeconomic needs identified, and your experience tracking the services and/or partnerships provided to address the social determinants.

**Coaching and Training Infrastructure**

Brief description of coaching and training models that your organization(s) have used to support your members in other data collection and patient engagement initiatives and how you would adapt those models to train your members in implementing PRAPARE and responding to socioeconomic needs identified.

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### **Data Reporting and Aggregation Infrastructure and Experience with Data Analytics**

Please describe your team’s infrastructure, staff, and models used for aggregating and sharing data across your members (either for one EHR system or across multiple EHR systems), noting partners involved and tools used to aggregate data. Describe your team’s capabilities and experience with data analysis, either in-house or through partnerships.

### **Participation in Delivery System Transformation Efforts and/or Payment Reform Demonstrations**

Please describe your team’s participation in delivery system transformation efforts and/or payment reform demonstrations and how you would incorporate PRAPARE data into such efforts. Please note other major stakeholders participating in these initiatives.

### **Plans to Use PRAPARE For Delivery System Redesign and to Inform Policy or Payment**

Please describe your team’s plans for using PRAPARE data.

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## **Plan and Approach**

- **PRAPARE Academy Team Members** – *“Who is involved in this effort and what will they do?”*

Describe your management plan that indicates which staff from your organization and your partner organizations will participate in the Academy and/or support your members in implementing PRAPARE. Please list names of Academy team leads, their current roles, and information about their role(s). Please also list health center partners.

- **Plan and Approach**

- Please describe your team’s plans to complete milestones and support your health center members in using PRAPARE.
- How will partner organizations work together to complete milestones?
- What populations will the health center target during piloting (if known)?
- What other initiatives and/or goals will PRAPARE be integrated with (if any) (e.g., other assessments, PCMH, Community-Centered Health Homes, transformation goals, quality improvement goals, etc.)

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- **Risk and Response** – *“What problems might you face while spreading PRAPARE, and what will you do about them?”*

Identify potential problems and barriers to participating in the Academy and supporting members in implementing PRAPARE. Describe planned response strategies for each risk.

Include other initiatives that may impact effectiveness

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## Sustainability beyond the Academy

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- **Capacity and Plans to Spread PRAPARE** – *“How do you plan to spread PRAPARE to more organizations?”*

Describe your plan (if any) to spread PRAPARE to more health center members and/or other community partners. How many of your members (number of organizations and % of total members) do you plan to spread PRAPARE to and what are the projected timelines to do so?