GPCI Senetics in PRIMARY CARE INSTITUTE

Recent advancements in the fields of genetics, genomics, and epigenetics have led to the increased understanding about the interplay between genetics and environmental factors as a determinant of health. The American Academy of Pediatrics (AAP) identified a need to capitalize on this increased understanding, as well as advancements in related technologies, so that quality personalized medicine—providing care that is tailored to the unique genetic traits and needs of the individual—can become the standard of care. As a result of this need, The *Genetics in Primary Care Institute* (GPCI)—a 3 year cooperative agreement between the Health Resources & Services Administration Maternal & Child Health Bureau and the American Academy of Pediatrics—has been established.

Project Goals

The overall vision of the GPCI is to increase primary care provider (PCP) knowledge and skills in providing genetic-based services. This will be accomplished by achievement of the following goals:

- Mobilizing a community of learners (PCPs) that will utilize quality improvement science to develop, implement, and evaluate strategies to enhance PCP knowledge, practice, and attitudes regarding the provision of genetic-related services.
- Implementing a strategy to address systems and policy to accelerate the provision of genetic medicine via the establishment of a technical assistance center.
- Assessing and addressing residency training needs in order to more fully imbed the practice of genetic medicine into the future PCP workforce.

Project Components

Quality Improvement Project/Community of Learners

A Project Advisory Committee (PAC) has been established that is comprised of experts in the field of genetics, primary care medicine, public health, and consumer advocacy. The PAC will provide strategic oversight for the GPCI. Additionally, the AAP will utilize its established quality improvement program—Quality Improvement Innovation Network (QuIIN)—to work with an Expert Group and a community of learners (primary care providers and their practice staff) on the development of a change package including strategies and tools to enhance primary care delivery of genetic medicine. In order to increase mentorship capacity for PCPs nationwide, GPCI also will develop structured processes to pair PCPs with genetic experts at state and local levels.

Systems and Policy Development

A colloquium on genetic literacy will be organized to provide a forum for the development of key recommendations to support ongoing work in this arena with the goal of further increasing the knowledge base about, and awareness of, genetic literacy in the medical home. The AAP will also establish a Technical Assistance Center (TAC) to serve as a means to further coordinate systems and policy development. The TAC will accelerate the provision of genetic medicine by fostering ongoing education, technical assistance, systems linkages, policy development, and information sharing among key stakeholders.

Continuing Medical Education and Training

The AAP has established multi-faceted and expansive communication, education, and training networks. Facilitated via these networks and established relationships with other primary care societies, GPCI will embed the practice of genetic medicine into the PCP workforce. This will be accomplished through the assessment of current pediatric residency training curricula, development of a curriculum that integrates genetics into existing core competencies, and the integration of key concepts identified through the GPCI into ongoing continuing education offerings.

For additional information on the Genetics in Primary Care Institute, please contact: Natalie Mikat-Stevens, MPH, Manager, Genetics in Primary Care Institute, Division of Children with Special Needs, American Academy of Pediatrics, at 847/434-4738 or <u>nstevens@aap.org</u>.

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