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Practice Facilitation as a Means of Redesigning and Strengthening Primary Care

February 2, 2012

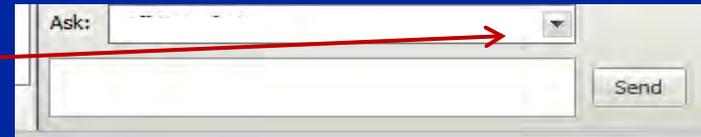
Michael Parchman, AHRQ

Lyndee Knox, LA Net

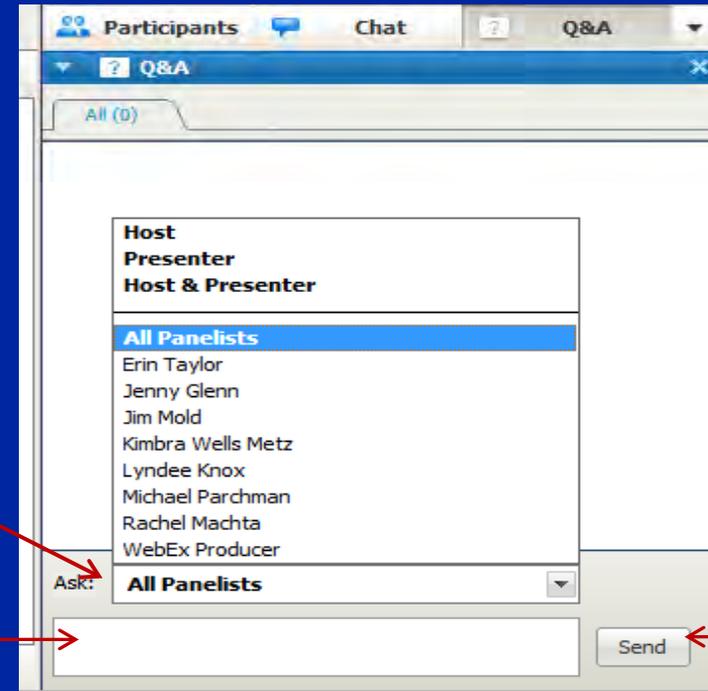
Erin Fries Taylor, Mathematica Policy Research

ATTENDEES: SUBMITTING A QUESTION TO Q&A

- In the Q&A panel , please click on the dropdown menu arrow
- A dropdown list of the panelists and an All Panelists selection will appear



- **Select “All Panelists”**
- Then type in your question in the field below the dropdown menu.
- Hit “Send.”
- The question will then be sent to all panelists.



Type in question

Hit “Send”

Acknowledgments

- **This work is supported by the Agency for Healthcare Research and Quality (Contract No. HHS A290200900019I).**
- **Project team included:**
 - **AHRQ – Michael Parchman, Janice Genevro, David Meyers**
 - **LA Net – Lyndee Knox**
 - **Mathematica – Erin Taylor, Kristin Geonnotti, Rachel Machta, Eugene Rich, Jung Kim, Jessica Nysenbaum, Debbie Peikes**

The Context for Practice Facilitation (Michael Parchman)

What are Practice Facilitators?

“Practice facilitators are specially trained individuals who work with primary care practices *to make meaningful changes designed to improve patients’ outcomes.*”

[They] help physicians and improvement teams develop the skills they need to adapt clinical evidence to the specific circumstance of their practice environment.

--DeWalt, Powell, Mainwaring, et al. 2010



**Zoe-Anne Fitzhugh, RN,
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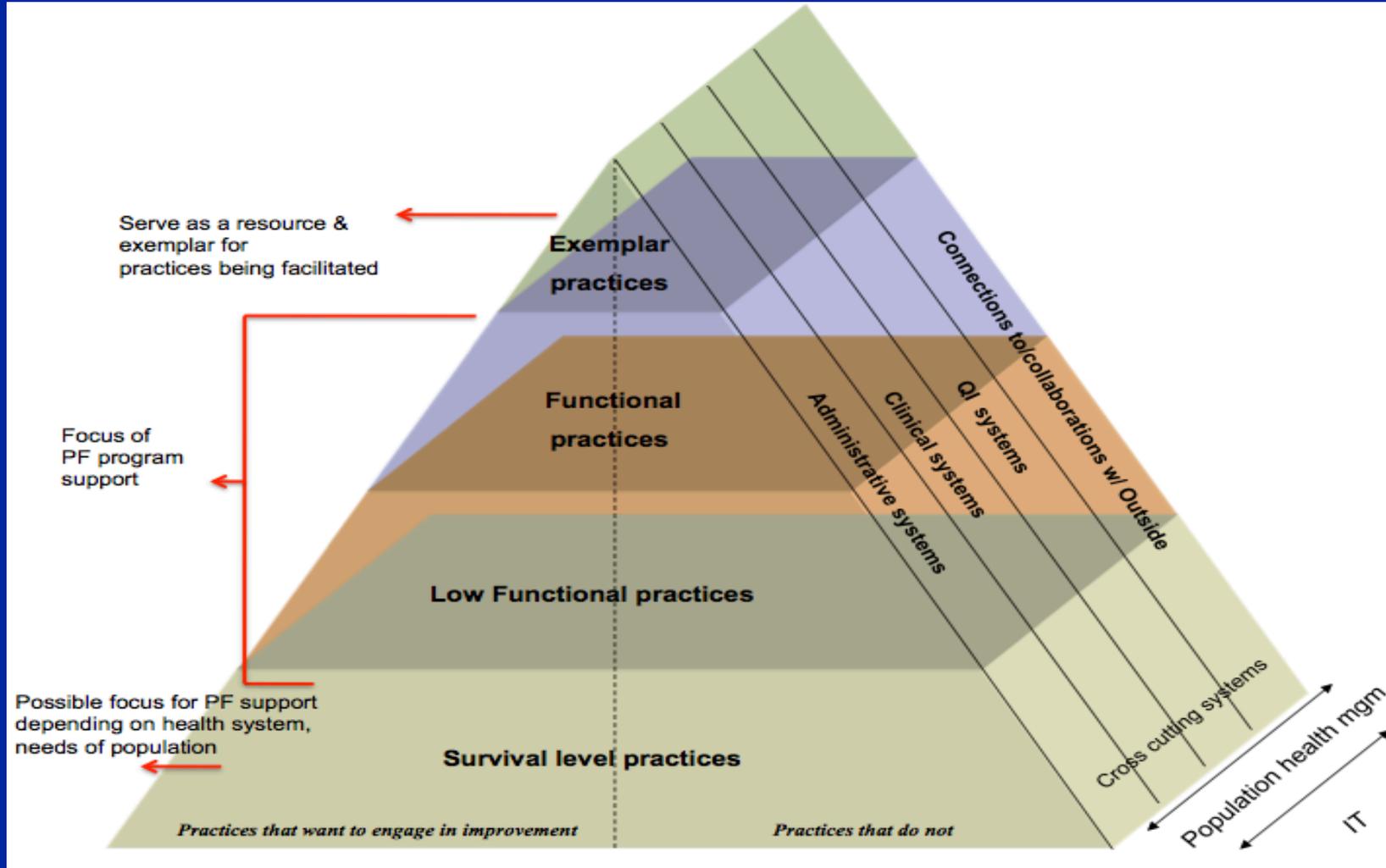
What do facilitators do?

- **Assess practice (admin, finance, clinical, HR, etc.)**
- **Train QI teams**
- **Facilitate meetings**
- **Manage improvement projects**
- **Executive coaching**
- **“Curate” resources for practice**
- **Post-implementation HIT optimization**
 - **Attain meaningful use**
 - **Get data to door for QI**
 - **Set-up registries**
 - **IT support for panel management**

What do facilitators do? *(continued)*

- **Help practices implement new processes (PCMH, Care Model, other):**
 - **Implement/optimize care teams**
 - **Attain meaningful use**
 - **Train panel managers/implement panel management**
 - **Empanel**
 - **Improve self-management support**
 - **Implement practice guidelines**
- **Identify & learn from exemplars**
- **Form learning communities**
- **Spread good ideas**

Who do they facilitate? One model for allocating a scarce resource



Evidence Base for Practice Facilitation

- 2012 Meta-analysis of research on PF
 - Facilitated practices are 3 times more likely to adopt evidence-based guidelines than non-facilitated practices

Baskerville, Liddy, and Hogg. 2012. "Systematic Review and Meta-Analysis of Practice Facilitation Within Primary Care Settings." *Annals of Family Medicine* 10(1):63-74.

Other: Nagykaldi, Mold, and Aspy. 2005. "Practice Facilitators: A Review of the Literature." *Family Medicine* 37:581-588.

PF Cost Analysis

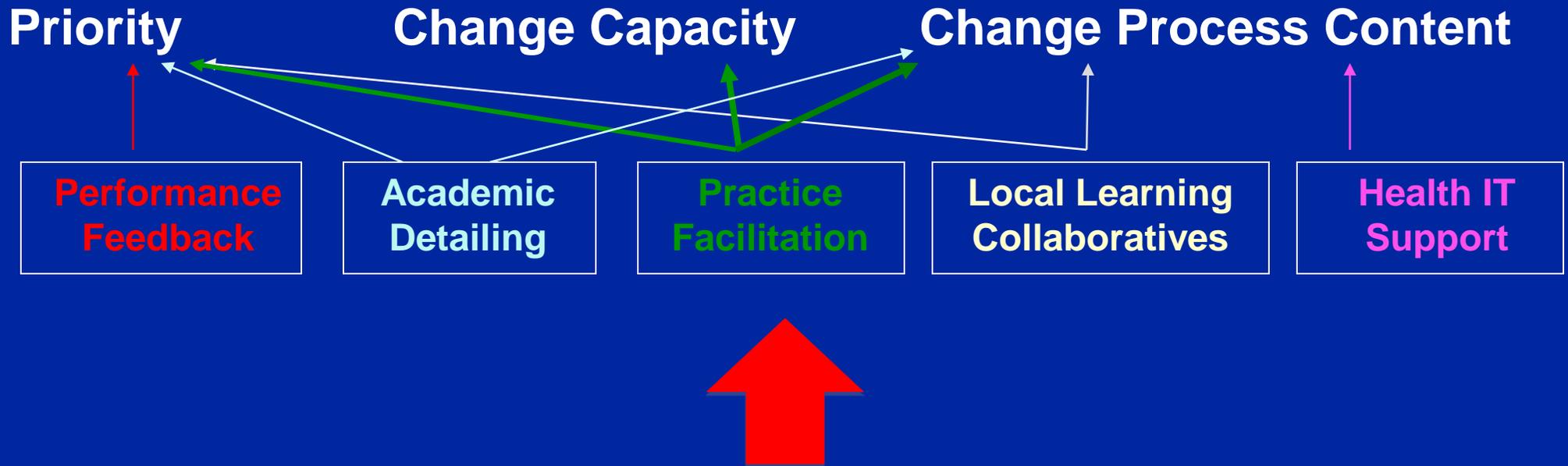
- Cost-consequence analysis of PF in Canadian context
 - ROI on intervention: 40%
 - Savings: \$3600/MD, \$63,000/PF

Hogg , Baskerville, and Lemelin. 2005. Cost saving associated with improving appropriate and reducing inappropriate preventive care: cost consequences analysis. *BMC Health Services Research* 5(20): 1-15.

Is Practice Facilitation THE answer?

- ***“Necessary but not sufficient”***
- **PF is ONE resource that complements a range of other improvement resources:**
 - academic detailing
 - benchmarking
 - learning collaboratives
 - payment reform
- **But PF is also UNIQUE among these resources**
 - helps marshal and coordinate across resources
 - supports **SCALE UP AND SPREAD**
 - pay-off is not just the immediate – it’s the long-term presence & availability of the facilitator

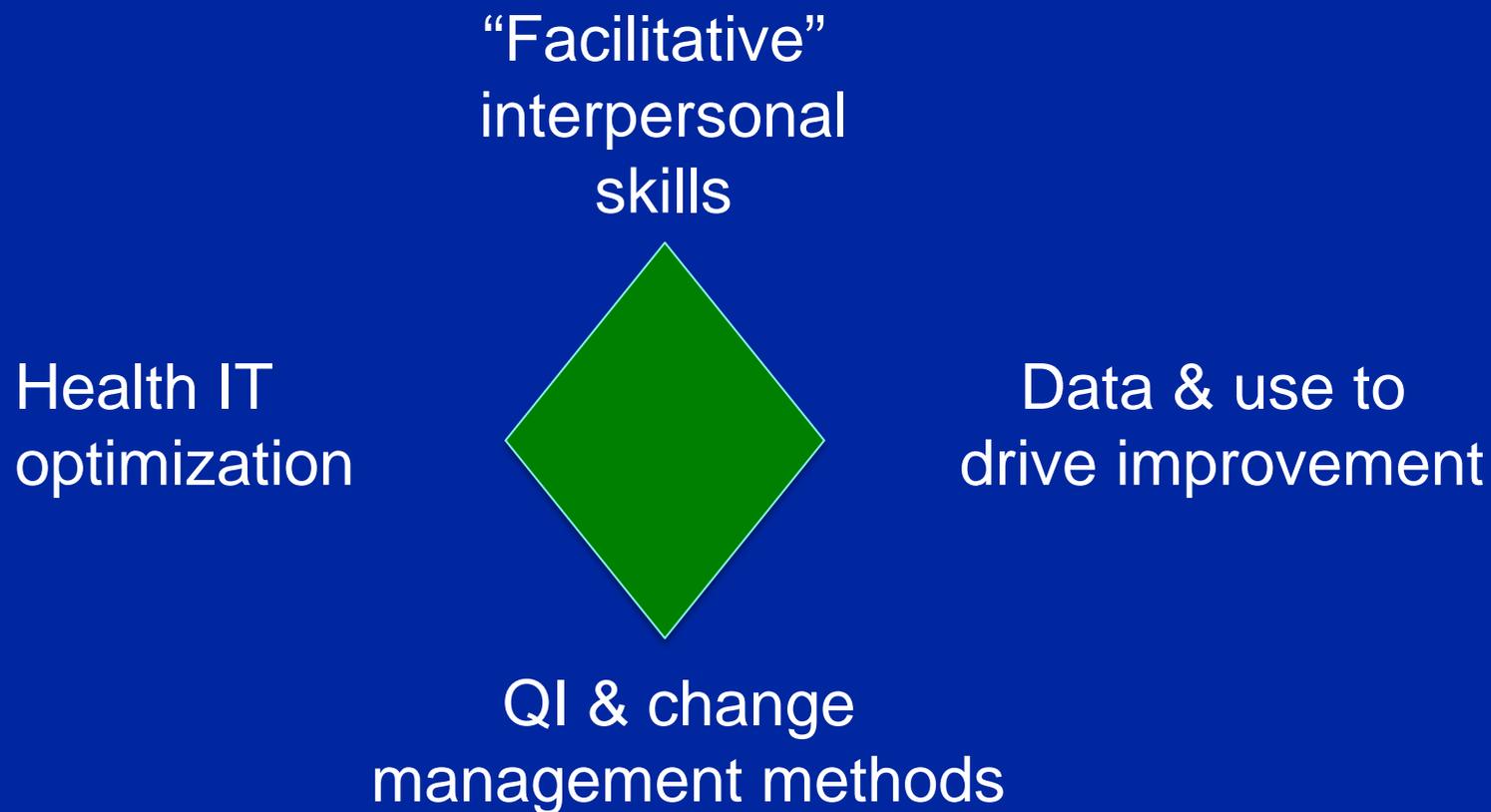
Proposed Effects of QI Interventions on Change Elements



Source: Jim Mold



Requires DEEPLY SKILLED workforce



PLUS: Expertise in specific content of intervention (PCMH, etc.)

Facilitation ALSO Requires

- Intervention with **CLEARLY** defined **KEY-DRIVER** model to guide PF work with practices and keep them focused and *”out of the poppies”*
 - Choice within structure
- **ROBUST TRAINING** and **SUPERVISION** for facilitators
- **SYSTEMS** for **MONITORING PROGRESS & PERFORMANCE**: “Practice Registries” for facilitators, feedback on PF and practice performance
- **LONG-TERM COMMITMENT**: the “magic is in the permanence not the immediate.” PCMH is just the beginning....

What types of organizations are setting up PF programs?

Practice-Based Research Networks (PBRNs)

Examples: Oklahoma (OKPRN), New York (UNYNET),
Los Angeles (LA Net), Oregon (ORPRN), etc.

What?

Support QI
Evidence translation
Practice based research

Where?

Rural to Urban
Small to Large
Safety net to affluent
Local to State-wide

Jim Mold will talk about OKPRN's program

Area Health Education Center (AHECs)

Example: North Carolina

QI Coaches

What?

Support QI, PCMH transformation
Health IT implementation

Where?

Statewide

Ann Lefebvre will talk today

Quality Improvement Organization (QIOs)

Example: Qualis Health et al. (Safety Net Medical Home Initiative)
QI coaches + collaboratives

What?

PCMH Transformation
Empanelment
Team-based care
Patient-centered interactions
Enhanced access
Care coordination
Evidence-based care

Where?

5 states

Member Associations

Example: Washington Academy of Family
Physicians

QI coaches

What?

Medical Home Transformation
Diabetes care improvement

Where?

Members statewide

Kimbra Wells Metz will talk today

State and Local Health Departments

Examples: Oklahoma Health Authority, Vermont, Maine, Massachusetts, New York City

PF plus collaboratives, payment reform, etc.

What?

PCMH transformation

Implement care coordination

Improve quality in practices serving high proportion of complex/high-risk patients

Where?

Statewide

Citywide

Two stories ...

QI Infrastructure Development: WeAreVeryBusy FQHC

FQHC, 2 sites, 50,000 visits/year

PF there for 10 months

QI infrastructure:

- **Then:** CMO with excel sheet
- **Now:** Performance reporting by provider, QI team with diverse membership, plan, process and data

Chronic Kidney Disease (CKD) Guideline Implementation

6 FQHCs, 1 CHC, 1 private practice

Registry:

Then: None

Now: CKD registry

Soon: Trained population manager

Lab data/decision support:

Then: eGFRs could not be included in registry (lab issue); could not generate trend lines

Now: Vendor change system to contain eGFR data and produce trend line

Once upon
a time...

Developing and Running a Primary Care Practice Facilitation Program: A How-to Guide

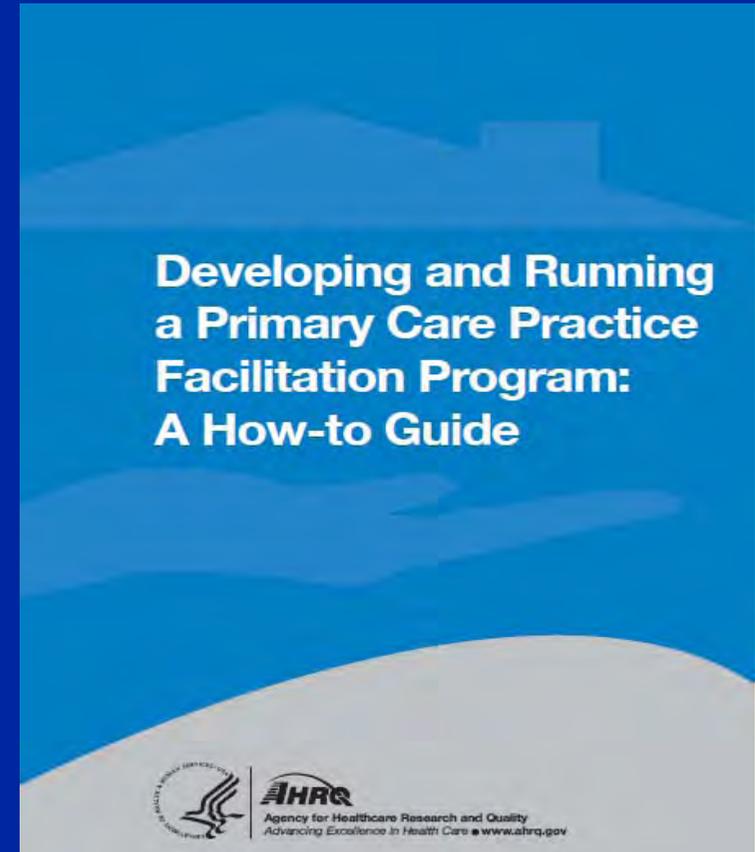


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How the Manual Came Together

- **How it was developed**
 - Invited 30 experts
 - Facilitated calls to identify critical topic areas
 - Divided into working group based on experience and interest
 - Gathered tools and resources
- **Tension to tell the story about “how to facilitate” rather than “how to start and run a program”**



Thanks to the PF Expert Working Group

- **Manual reflects collective knowledge and experience of more than 30 experts in the field**

Carolyn Allshouse

Cheryl Aspy

Thomas Bodenheimer

Bonni Brownlee

Caroline Carter

Katie Coleman

Allen Dietrich

Darren DeWalt

Perry Dickinson

Elizabeth Foley

Brenda Fraser

Allyson Gottsman

Joanne Gutowsky

William Hogg

Craig Jones

Ann Lefebvre

Clare Liddy

Jeanne McAllister

PF Expert Working Group - *continued*

Marly McMillen

Gail McNutt

James Mold

Regina Neal

Amanda Parsons

Joan Pernice

Diane Powers

Mary Ruhe

Constance Sixta

Jenney Samuelson

Lisa Watkins

PF Manual's Intended Audiences

- For future and existing directors of PF programs
- Target audience is any organization interested in developing a facilitation workforce to improve or transform primary care:
 - State or local departments of health
 - Quality Improvement Organizations (QIOs)
 - Area Health Education Centers (AHECs)
 - HITECH Regional Extension Centers (RECs)
 - Practice-based research networks (PBRNs)
 - Primary care associations (PCAs)
 - Accountable care organizations (ACOs)
 - Chartered value exchanges (CVEs)
 - Large health care systems

Chapters and Key Topics

Chapter	Selected Key Topics
1. Background and existing evidence for PF	<ul style="list-style-type: none"> • History of PF • Evidence for PF's effectiveness • PF in the current policy environment
2. Creating an administrative home	<ul style="list-style-type: none"> • Selecting an organizational home • Defining your mission and goals • Staffing
3. Funding your PF program	<ul style="list-style-type: none"> • Creating a business plan • Identifying potential funding sources • Marketing your program to funders
4. Developing your PF approach	<ul style="list-style-type: none"> • Creating a key driver model • Identifying your PF team • Stages and key activities • Defining facilitator roles and activities

Chapters and Key Topics - *continued*

Chapter	Selected Key Topics
5. Hiring your practice facilitators	<ul style="list-style-type: none"> • Core competencies needed • Deciding who to hire • Staffing models
6. Training your practice facilitators	<ul style="list-style-type: none"> • Assessing and leveraging existing training resources • Creating a curriculum • Selecting your educational approach and strategies
7. Supervising and supporting your facilitators	<ul style="list-style-type: none"> • Selecting a supervisor for your facilitators • Deciding on individual versus group supervision • Ways to create a learning community
8. Evaluating the quality and outcomes of your PF program	<ul style="list-style-type: none"> • Creating an internal QI program • Identifying metrics for your QI process • Evaluating the outcomes

Perspectives from Leading PF Experts

How do you view the role of practice facilitation in the overall quality improvement context?



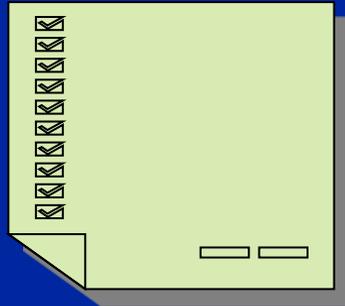
James Mold, University of Oklahoma
and Director, Oklahoma Physicians
Resource/Research Network



Ann Lefebvre, University of North
Carolina and Associate Director
of NC AHEC Program

Effective Implementation of Innovations in Primary Care

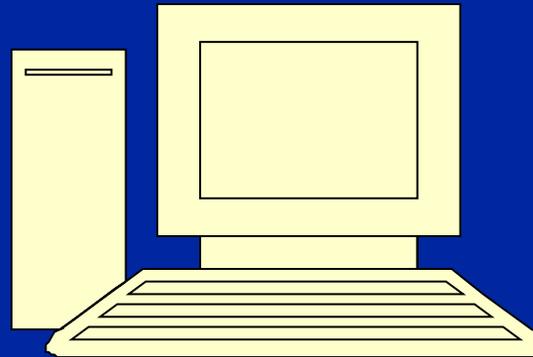
**Performance
Feedback**



**Academic
Detailing**

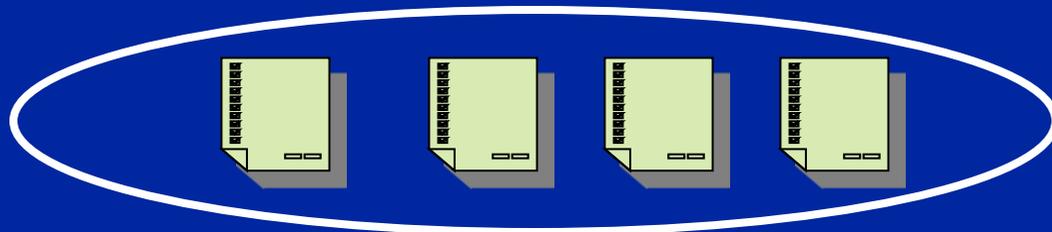


Facilitation

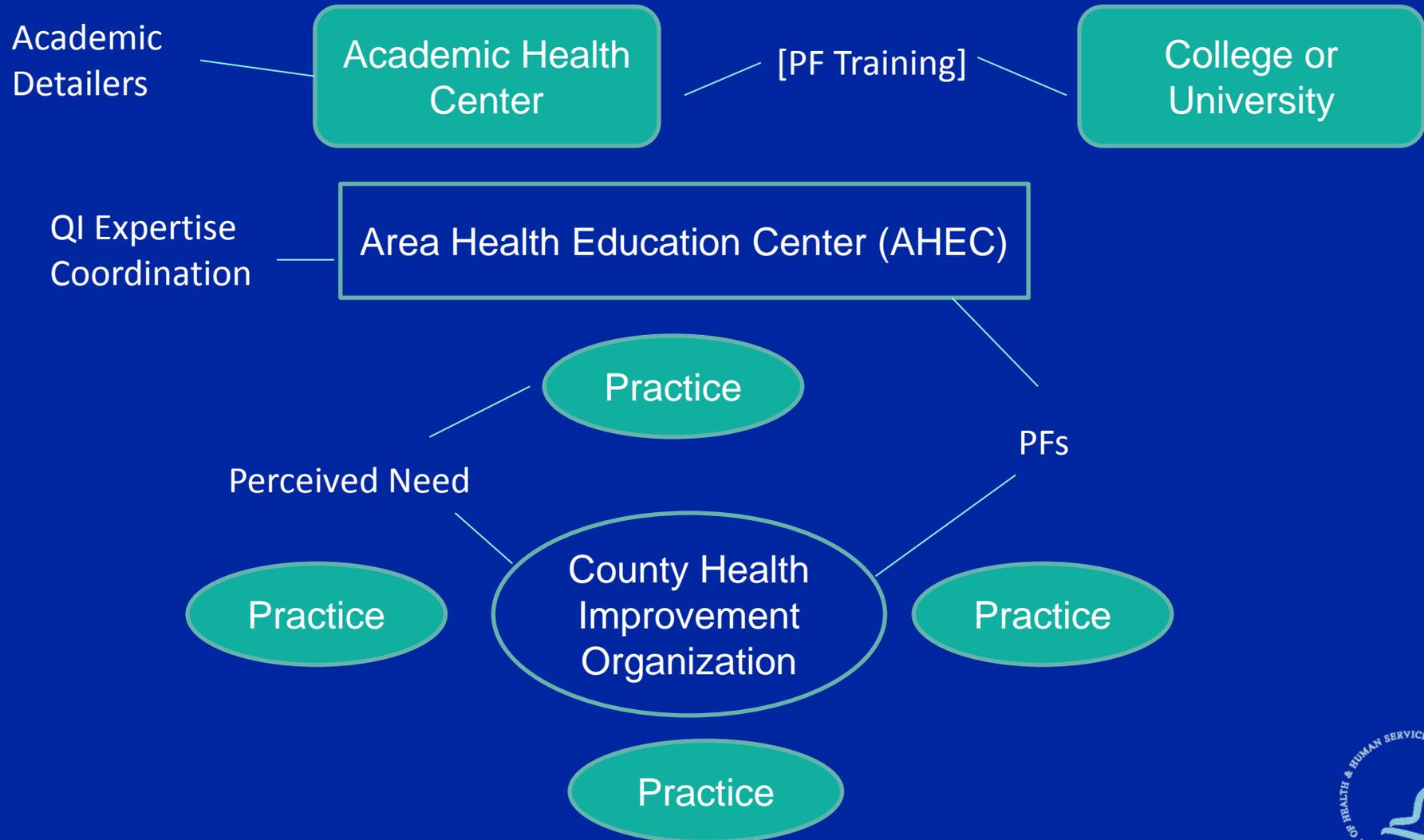


IT Support

Local Learning Collaboratives



Practice Facilitation in Context



Perspectives from Leading PF Experts

What do you wish you'd known when you were developing your PF program?

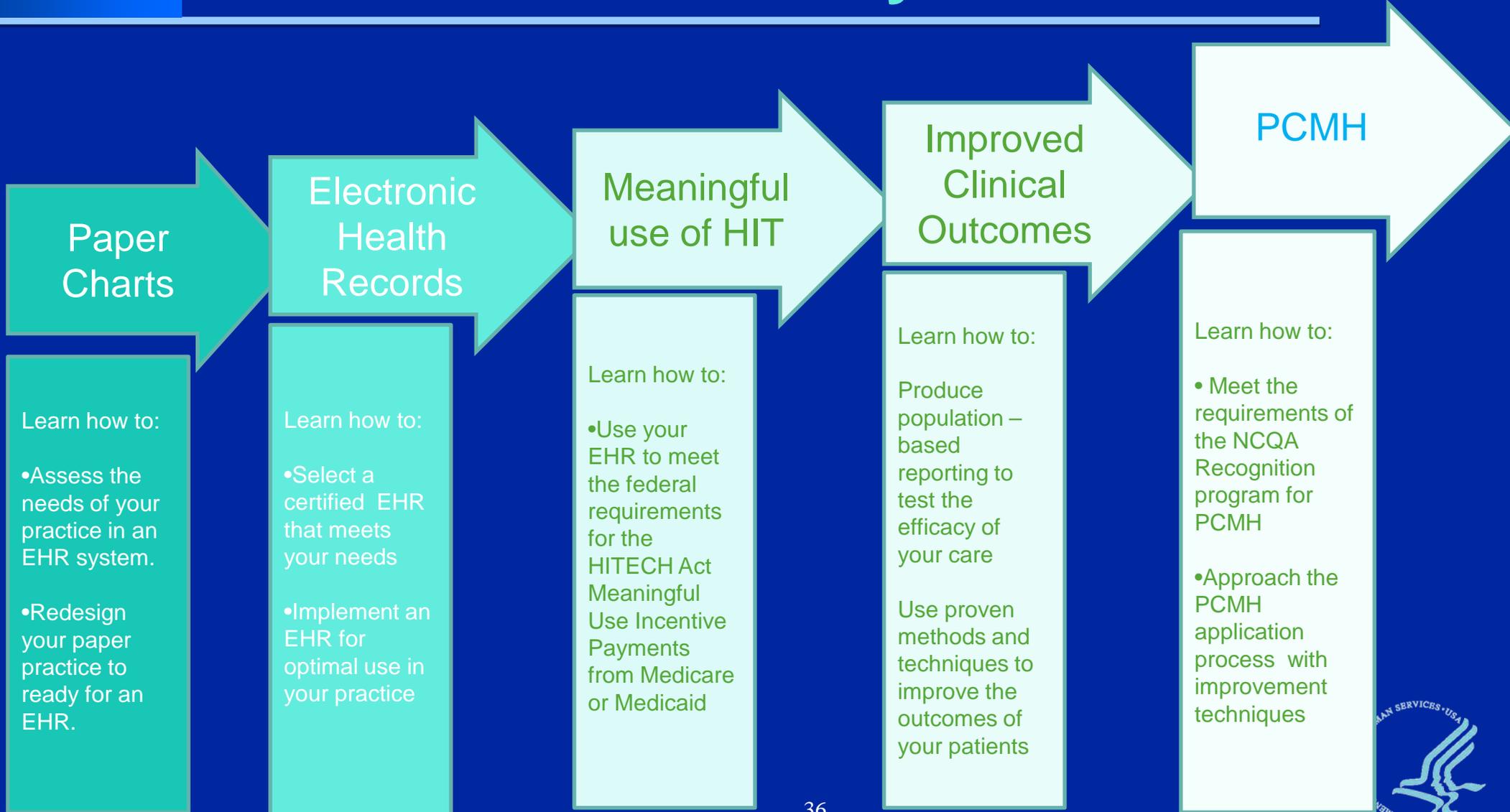


James Mold, University of Oklahoma
and Director, Oklahoma Physicians
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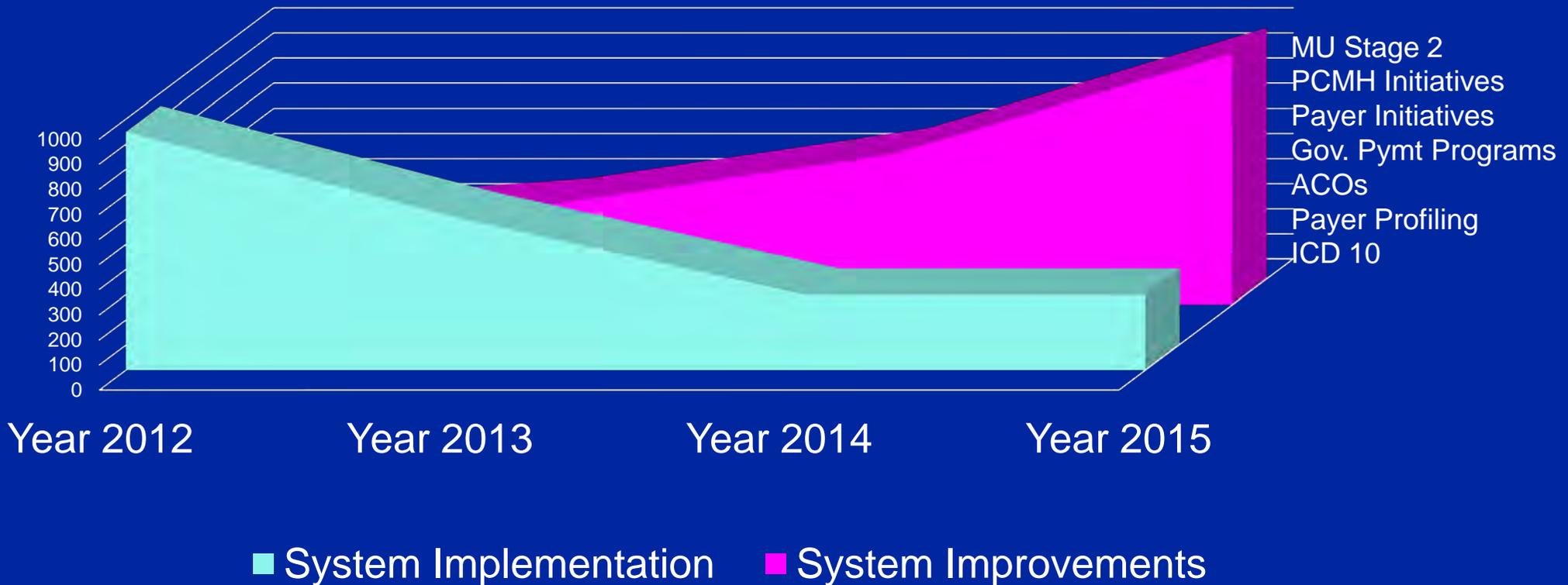


Ann Lefebvre, University of North
Carolina and Associate Director
of NC AHEC Program

Practice-Based Services Provided by NC AHEC



Future Practice Needs – NC AHEC



Perspectives on Using the Manual

WAFP Practice Transformation Coaching



**Kimbra Wells Metz, Director of Practice Transformation,
Washington Academy of Family Physicians**

WAFP History

- Supporter of WA State Collaboratives since 1999
- Piloted the AAFP Practice Enhancement Program, 2005
- Recipient of American Board of Medical Specialties (RWJF) grant Improving Performance In Practice (IPIP), 2008
- Co-Lead, Washington Patient-Centered Medical Home Collaborative, 2009-2011

Practice Transformation Coaching – WAFP’s Service Offerings

Triage: Assessment	<i>Evaluate Your Current Preparedness for PCMH or Other Key Performance Measures</i>
	<input type="checkbox"/> PCMH Medical Home Index <input type="checkbox"/> Use your quality & key performance measures <input type="checkbox"/> Other designated assessment tool
Transformation Support	<i>Provide Education and Resources</i>
	<input type="checkbox"/> In-person and virtual learning sessions <input type="checkbox"/> Coach supported and self study options <input type="checkbox"/> Train the trainer
Transformation Coaching	<i>Customized Practice Transformation Coaching</i>
	Work with your team to: <ul style="list-style-type: none"> <input type="checkbox"/> Identify solutions for QI opportunities. <input type="checkbox"/> Re-design work flow processes <input type="checkbox"/> Test rapid process improvement solutions <input type="checkbox"/> Apply education and resources
Transformation Maintenance	<i>Sustain and Spread the Gains</i>
	<input type="checkbox"/> Tools and resources <input type="checkbox"/> Maintenance coaching
Learning Network	<i>Ongoing Learning and Teaching Opportunities</i>
	<input type="checkbox"/> Stay connected and share best practices <input type="checkbox"/> Mentor a clinic/organization <input type="checkbox"/> Learn from other organizations

Q&A

Please submit questions via the question panel on the right.

Next Steps

- Please respond to the survey *immediately* following this webinar
- Visit <http://www.pcmh.ahrq.gov>
 - Note the Practice Facilitation webpage
- Join an upcoming active learning community to learn more about PF
 - Series of webinars
 - Inventory of resources/tools for sharing
 - Development of briefs, FAQs, etc.
- Sign up for the PF listserv in the near future!