

## [AHRQ's Primary Care Practice Facilitation Forum](#)

This email newsletter is the first step in building a learning network for individuals with an interest in practice facilitation. We will use this listserve to share questions and answers submitted by learning forum members, as well as resources, research articles and events of interest.

**October 12, 2012**

### **Perspectives from the Field**

This week, we asked Hunter Gatewood, Director of Health Improvement at the San Francisco Health Plan, about the **relationship between health plans and practice facilitation/coaching programs**. See his thoughts below. On September 28<sup>th</sup>, during [AHRQ's final webinar on PF](#), Hunter served as a “voice from the practice facilitation field.”

#### **\*Why would a health plan fund a practice facilitation/coaching program?\***

**Hunter Gatewood:** As a health plan, our mission is to provide proactive care, excellent service for patients (our health plan members), and cost containment – all contributing to better health for our member population. It's the Triple Aim.

Practice facilitation works to infuse best clinical practice and best management practice into daily clinic operations: to do what works for patients, use small quick tests of change, work as a team, and use data to make decisions – all that good stuff. Practice coaching gets to the heart of the matter, and really leads to culture change within a clinic. Practice coaching gets those cartoon light bulbs popping on over people's heads. Coaches get elbow to elbow with a clinic management team, with the person scheduling the appointments, and the person doing panel management outreach.

Who doesn't get the vision of high-performing medical-home-style care? What is keeping this improvement team from focusing on measures? Or having powerful productive meetings? Who is and who is not focused on better results for patients? How well is the practice doing in terms of maintaining their successes and attention to measureable improvement from the past 10 years or so of QI projects? The coach knows the answers to these questions. The coach also knows how to help.

#### **\*What benefits have practice facilitators/coaches brought to the San Francisco Health Plan?\***

**Hunter Gatewood:** Quantitative results from our first foray into PF in 2010: In a small learning collaborative to improve appointment access, four clinics worked with a practice coach to help them reduce delay time for appointments. Through didactic sessions and the help of their coach, as a group, they reduced their appointment delays by 50% or more in number of days. At the same time, all four clinics increased the number of patients on their panels. In a separate concurrent effort, five clinics worked with a practice coach to implement best practices for provider-patient communications and staff-patient communications. In a post-test, these sites improved their visit-based Consumer

Assessment of Healthcare Providers and Systems (CAHPS) scores on 8 of 12 measure domains, compared to the pre-survey before the project began.

Qualitative reports of benefits: Another benefit of practice coaching is that, at the same time the coach is working to help a practice's staff learn about and fix their problems, the coaching work also is a professional development resource. In this way, and because PF helps fix workplace problems, coaching contributes to practice staff work satisfaction. In the same way, for me as a manager, my staff sees serving as a coach as an exciting opportunity. Running a coaching program helps me recruit and keep really high-caliber QI staff.

From a clinic medical director: "Our project and our coach dramatically enhanced our organization's capacity to collect, analyze, monitor and respond to our data."

## Opportunities of Interest

You may recall that eNewsletters 25 and 26, both of which can be accessed [here](#), discussed **training and certification programs** available to practice facilitators/coaches. Here are two other professional development opportunities to consider:

### **Health TeamWork's QI Coach Training Program:**

Health TeamWork's website describes this program, held quarterly in Colorado, as a "hands-on training program that prepares graduates to facilitate practice transformation immediately." The program requires a week to complete and includes "didactic sessions in the classroom," in addition to fieldwork.

**For more information** on this program, visit <http://www.healthteamworks.org/coach-training/CUprogramincludes.html>.

### **Maine Practice Improvement Network (MPIN) Quality Improvement Coach Training:**

MPIN describes its QI coach training program as "designed to build the individual capacity of quality managers/professionals and those leading or interested in leading quality improvement activities" by using "didactic instruction, case studies/scenarios, open inquiry, role playing and group exercises."

**For more information** on this program and to access archived training materials, visit <http://www.mpin.org/trainings.html>.

## Responses to “What Do You Think?”

We asked members of this learning community for their responses to the following question: **From your perspective, what are the emerging areas that facilitators might assist practices with in the future?**

Here are a few of the responses we received:

- “PCMH and ACO measures as they grow nationwide”
- “Physician leadership programs and physician leadership/care manager networks”
- “Assisting practices with achieving NCQA PCMH recognition”

## Resources

Check out the newly updated [PCPF Webinars page](#) and [PCPF Resources page](#) at the PCMH Resource Center ([www.pcmh.ahrq.gov](http://www.pcmh.ahrq.gov)).

We’ve posted previous editions of the PCPF eNewsletter, slides and audio from the Practice Facilitation Webinar series, and information about upcoming learning opportunities. Please visit the PCMH Resource Center at [www.pcmh.ahrq.gov](http://www.pcmh.ahrq.gov) to explore white papers, briefs, a searchable citations database, and other resources related to the Patient-Centered Medical Home and primary care improvement.

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