

AHRQ's Primary Care Practice Facilitation Forum

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

Perspectives from the Field

How can facilitators assist a practice in meaningful use of health IT tools, including registries and EHRs?

Below are some perspectives from two PF experts:

- **Allyson Gottsman, Health TeamWorks**
- **Connie Sixta, RN, PhD, MBA, Sixta Consulting Inc.**

Other programs are likely to have different perspectives, depending on their focus, context, and other factors. How does your experience compare?

Allyson Gottsman: Having effective Health Information Technology is essential for practice transformation – you can't do the work without registry functionality which we define as:

- point of care decision support (what is needed for "today's" visit),
- outreach reports – who has gaps in care and what is the contact information so we can contact them to come in to address the gaps, and
- quality measures to look for opportunities for process improvement.

In my view, the role of the facilitator is to make sure the practice understands the importance of electronic support. If facilitators don't have the expertise within their organization, they can arrange an introduction to the local Hi-Tech Regional Extension Center in the community. If the practice wants to start with a standalone registry first, then the facilitator should have one or more that they recommend.

Once the practice has the electronic tool, then the facilitator can facilitate the development of efficient workflows, support the evolution of new roles and responsibilities to effectively use the EHR or registry as decision support to provide reliable implementation of guideline concordant care, optimizing the skills and resources of the staff in a team approach to care.

Another key role of the facilitator is to work with the practices to understand the key role that the quality measures can play in understanding the opportunity for process improvement. If the measures don't reflect optimum care, it doesn't mean there is any lack of knowledge in what to do for patients; it is a matter of not having a reliable or efficient process in place to apply the knowledge.

Connie Sixta: Start by helping the practice to build IT tools around a population of patients (for example, patients with diabetes mellitus) and more generally, build the practice's capacity for using

health IT effectively. Identify the pilot population with diabetes (champion physician and team panel) and make sure the patients are considered active and that the provider verifies the list of patients with diabetes. Work with practice staff to help them identify and verify the rest of the patients within the practice with diabetes, on a per physician panel.

Then help the practice set up the registry for the pilot population and then complete the registry for the total diabetes population within the practice. Assist in embedding clinical guidelines with reminders integrated for each clinical measure. For example, the practice may want to create a population alert that indicates (either in the schedule or in the opening of the patient's medical record) that the patient has diabetes and needs specific guidelines followed. Help the practice create standing orders for members of the team (for example, Medical Assistants) so that appropriate clinical guidelines can be completed automatically before the provider sees the patient. This IT change promotes team work and allows the provider to do "value-added work" and have a "meaningful visit" with the patient. Train the practice staff to use the IT tools to create task lists for members of the team; this will help staff organize their workload.

The IT tools should support development of a flow sheet for the practice team that accurately lists completed guidelines and highlights guidelines that still need to be met. The IT tools should also create for the patient an up-to-date list of completed and needed care based on the guidelines and a graph of current measures/outcomes (for example, BP, A1c, LDL). These tools all enhance decision support by the provider, the staff and the patient.

What do you think?

If you'd like to join the discussion, please send your thoughts to us at PracticeFacilitation@mathematica-mpr.com. Your responses will be compiled and shared in weekly newsletters.

Questions of the Week

- What are the core competencies needed by practice facilitators?
- How do you select your educational approach and training strategies for your practice facilitators?

We would like to hear from you in advance of the practice facilitation webinar on "Hiring and Training Practice Facilitators" on Wednesday, April 11th!

Submit your thoughts to PracticeFacilitation@mathematica-mpr.com. Your responses will be shared in next week's newsletter.

Please also let us know what other questions you are pondering by sending an email to the same address.

Upcoming Event

Practice Facilitation Webinar- Part II

Wednesday, April 11th, 12:30-2:00 EDT **Save the Date and Register Below!**

Title: Hiring and Training Practice Facilitators

Description: What should you look for when you are hiring a facilitator? What type of training do facilitators need to be effective? This webinar will discuss the core competencies needed by facilitators and various staffing models used by existing facilitation programs, as well as approaches and strategies for training your facilitators.

Webinar registration link:

<https://mathematicampr.webex.com/mathematicampr/onstage/g.php?t=a&d=664008699>

Resources

Please visit the PCMH Resource Center at 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.

Managing your account

You are receiving this email because you have subscribed to the AHRQ Practice Facilitation Listserv. If you would like unsubscribe, please email PCPF-signoff-request@LIST.AHRQ.GOV and include "unsubscribe" in the subject heading.

If this information was forwarded to you and you would like to subscribe, please email PCPF-request@LIST.AHRQ.GOV and include "subscribe" in the subject heading.

This service is provided to you at no charge by the [Agency for Healthcare Research and Quality](http://www.ahrq.gov) (AHRQ).