

Primary Care Practice Facilitation Curriculum

Module 28: Using the AHRQ Care Model Toolkit with Practices



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care • www.ahrq.gov



IMPROVING
PRIMARY CARE

Primary Care Practice Facilitation Curriculum

Module 28. Using the AHRQ Care Model Toolkit With Practices

Prepared for:

Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
540 Gaither Road
Rockville, MD 20850
www.ahrq.gov/

Contract No. HHS A2902009000191-Task Order No.6

Prepared by:

Mathematica Policy Research
Princeton, NJ

Primary Author

Lyndee Knox, Ph.D., LA Net Community Health Resource Network

Contributing Author

Cindy Brach, M.P.P., Agency for Healthcare Research & Quality

Series Editors

Jesse Crosson, Ph.D., Mathematica Policy Research
Robert J. McNellis, M.P.H., P.A., Agency for Health Research and Quality
Janice L. Genevro, Ph.D., Agency for Healthcare Research and Quality

This document is in the public domain and may be used and reprinted without permission except those copyrighted materials that are clearly noted in the document. Further reproduction of those copyrighted materials is prohibited without the specific permission of copyright holders.

The findings and conclusions in this document are those of the authors, who are responsible for its contents; the findings and conclusions do not necessarily represent the views of AHRQ. Therefore, no statement in this report should be construed as an official position of AHRQ or of the U.S. Department of Health and Human Services.

Suggested Citation

L Knox, C Brach. Primary Care Practice Facilitation Curriculum (Module 28). AHRQ Publication No. 15-0060-EF, Rockville, MD: Agency for Healthcare Research and Quality; September 2015.

Contents

Instructor’s Guide	1
Time	1
Objectives.....	1
Exercises and Activities To Complete Before and During the Session.....	1
Module 28.	2
Contents of the Care Model Toolkit.....	2
How Should You Use the Care Model Toolkit?.....	3
Suggestions for Using the Care Model Toolkit With Practices.....	3
Reference.....	5

Module 28. Using the AHRQ Care Model Toolkit With Practices

Instructor's Guide

Practice facilitator (PF) competencies addressed in this module:

- Basic skills in practice management and quality improvement

Time

- Pre-session preparation for learners: 75 minutes
- Session: 60 minutes

Objectives

After completing this module, learners will be able to:

1. Provide a summary of the content and chapters in *Integrating Chronic Care and Business Strategies in the Safety Net* toolkit.
2. Identify where the toolkit supports key drivers of improvement contained in the *Improving Performance in Practice Initiative (IPIP)*.
3. Use the toolkit to support improvement work with practices.

Exercises and Activities To Complete Before and During the Session

Pre-session preparation. Ask the learners to review information in items 1-3. (75 minutes)

1. The content of this module.
2. Access and review *Integrating Chronic Care and Business Strategies in the Safety Net* toolkit. Available at: <https://www.ahrq.gov/ncepcr/care/chronic-tool/index.html>.
3. Document the elements in the toolkit that you have had experience using in the past and what you learned using them.

During the session. Presentation (20 minutes)

1. Present key concepts from the module.

Activity for learners (20 minutes)

1. Have learners map contents of this toolkit to the *Assessment of Chronic Illness Care* tool (available at: <https://www.kpwashingtonresearch.org/our-research/research-areas/chronic-illness-management/improving-chronic-illness-care>) and to the IPIP key driver model contained in [Module 20](#) on quality improvement approaches.

Discussion. Ask questions and explore answers with learners. (20 minutes)

1. What elements of the toolkit do you think will be most useful to your work with practices?
2. What experience have you already had using the tools contained in the toolkit? What did you learn using these tools?

Module 28.

To promote spread of the Care Model, the Agency for Healthcare Research and Quality (AHRQ) commissioned the development of a Care Model toolkit. The MacColl Center for Health Care Innovation, in partnership with RAND and the California Health Care Safety Net Institute, created *Integrating Chronic Care and Business Strategies in the Safety Net*. This “change package” is designed to help practices implement elements of the Care Model (AHRQ, 2008).

This Care Model toolkit can be a resource to both you and the practices you work with. The toolkit includes a recommended process for implementing the Care Model and links to tools that you and your practices can use to support those changes. It also includes recommendations for strengthening the financial status of practices while implementing the Care Model.

Contents of the Care Model Toolkit

The *Implementing the Care Model and Business Strategies in the Safety Net* toolkit describes the specific practice changes involved in Care Model implementation. Practices are expected to go through four phases for a total of 12 key changes. Within each phase, the key changes do not need to be implemented in any particular order but should be pursued based on the needs of each practice. Table 28.1 lists the phases and key changes recommended in the toolkit.

Table 28.1. Toolkit phases and key changes contained in the Care Model toolkit

Phase 1: Getting Started

Organize your quality improvement team.

Familiarize your entire team with key improvement strategies.

Phase 2: Assess Data and Set Priorities for Improvement

Use data to set priorities.

Select performance measures based on your needs assessment.

Build performance measurement capacity.

Phase 3: Redesign Care and Business Systems

Organize your care team.

Clearly define patient panels.

Create infrastructure to support patients at every visit.

Plan care.

Ensure support for self-management.

Phase 4: Continuously Improve Performance and Sustain Changes

Reexamine your outcomes and make adjustments for continued improvement.

Capture incentives based on quality of care.

Each key change includes a table with specific action steps and associated tools. The Care Model toolkit includes links to more than 60 tools commonly used for quality improvement with the relevant changes, and example stories from practices that have made quality improvement pay.

How Should You Use the Care Model Toolkit?

You can use the Care Model Toolkit to:

- Get ideas for how to stage your work with practices.
- Learn about what key changes are needed to implement the Care Model.
- Gain exposure to a wide range of implementation tools.
- Serve as a “training curriculum” for your practice.
- Share parts of the toolkit with practices when working on those key changes.
- Serve as a text or reference book to be used in conjunction with facilitation.
- Train the practices to use the toolkit as a resource.

The toolkit, of course, does not cover every aspect of Care Model implementation. Furthermore, new tools are being developed all the time. Supplement the toolkit with additional materials depending on the needs of your practices.

Suggestions for Using the Care Model Toolkit With Practices

A demonstration project that used the toolkit with 18 community health centers provided insight into using the toolkit with practices:

- **Tip 1:** The toolkit links users with tools through the Web. Because of the dynamic nature of the Web, URLs may have changed since publication of the toolkit. Test the links in the toolkit before you ask practices to use them.
- **Tip 2:** Some of the links in the toolkit require registration to access. Let your practices know ahead of time when registration is required and that you have ascertained there is no charge to access the tool.
- **Tip 3:** Make it easy for members of the practice to access the toolkit. Place an electronic copy of the toolkit on the computer desktops of key staff and clinician leaders at the practice for easy access. Use tablet readers and broadband cards if you want to make the toolkit accessible during your visit to a practice. Broadband cards can be a good way to go since many practices do not have wireless Internet or have firewalls that may block your access to the Internet when you are at the practice.
- **Tip 4:** Select and use only those portions of the toolkit that meet the needs of each practice. The toolkit covers a wide range of topics and can be overwhelming to a practice in total. If your goal is to have practices use the toolkit on their own, introduce it to them gradually.

- **Tip 5:** Pick and choose content to match the practice’s needs. Some of the content contained under each key change in the toolkit may not logically follow the change process your practice will undergo. Do not feel obligated to follow the steps and sub-steps outlined by the toolkit.

Note: this module is based on Module 18 of the Practice Facilitation Handbook. Available at: <https://www.ahrq.gov/ncepct/tools/pf-handbook/index.html>

Reference

Agency for Healthcare Research and Quality. Integrating chronic care and business strategies in the safety net: a toolkit for primary care practices and clinics. Rockville, MD: AHRQ; August 2008. AHRQ Publication No. 08- 0104-EF. Available at: <https://www.ahrq.gov/ncepcr/care/chronic-tool/index.html> Accessed October 7, 2014.