Coach Medical Home

Strategies & tools to support patient-centered medical home transformation



MODULE 6: Sustainability & Spread

GroupHealth

MacColl Center for Health Care Innovation

THE COMMONWEALTH FUND

QUALIS HEALTH

Learning objectives for this module

After completing this module, you will know how to:

- Coach sites to support sustainability and spread from the beginning of a program.
- Prepare sites to continually improve even after your coaching time with them is over.
- Help organizations plan for spread to new locations—standardizing core elements while allowing room for customization.

Overview of contents

- Planning for sustainability
- Planning for spread
- Case study: Group Health's PCMH

Section 1

Planning for sustainability

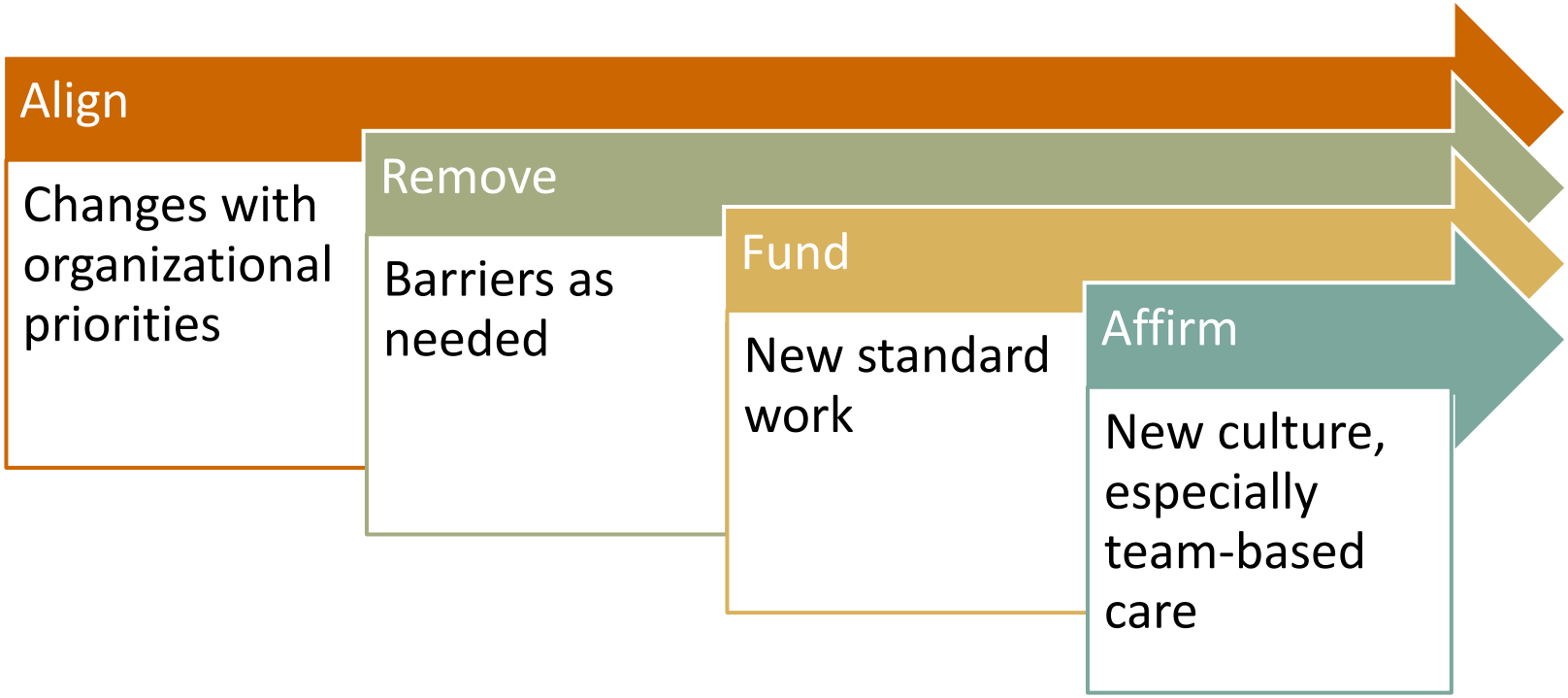
Sustainability planning goes hand in hand with PCMH transformation

The Sustainability Planner from Health Quality Ontario provides guidance in seven areas:

1. Clarify — what you are sustaining
2. Engage — leaders and help them understand their role
3. Involve — and support frontline staff
4. Communicate — the benefits of the improved process
5. Ensure — the change is ready to be implemented & sustained
6. Embed — the improved process
7. Build — in ongoing measurement

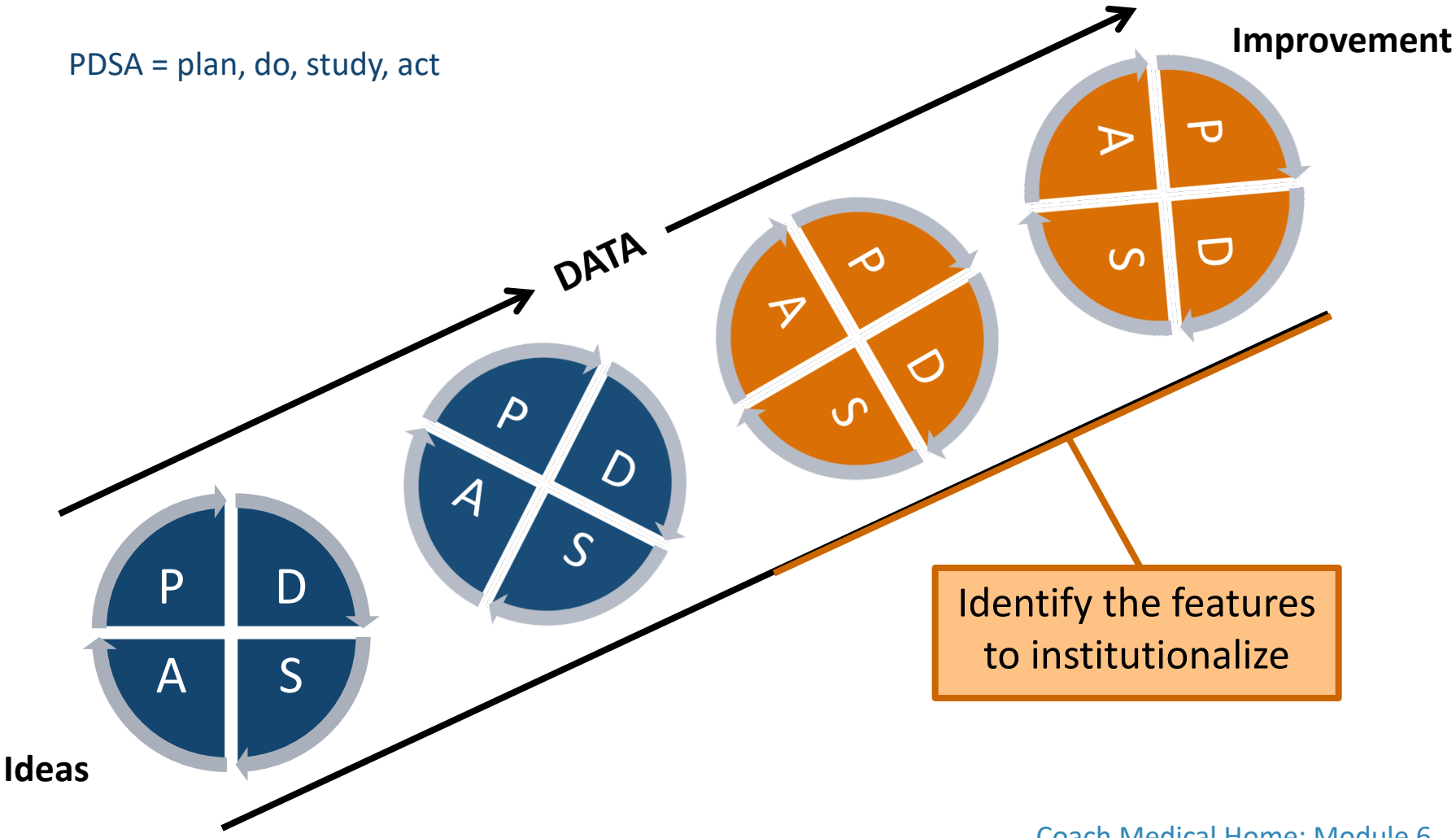
The fundamental importance of leadership

Leaders across the practice—including members of the Board—need to be involved to foster sustainable implementation.

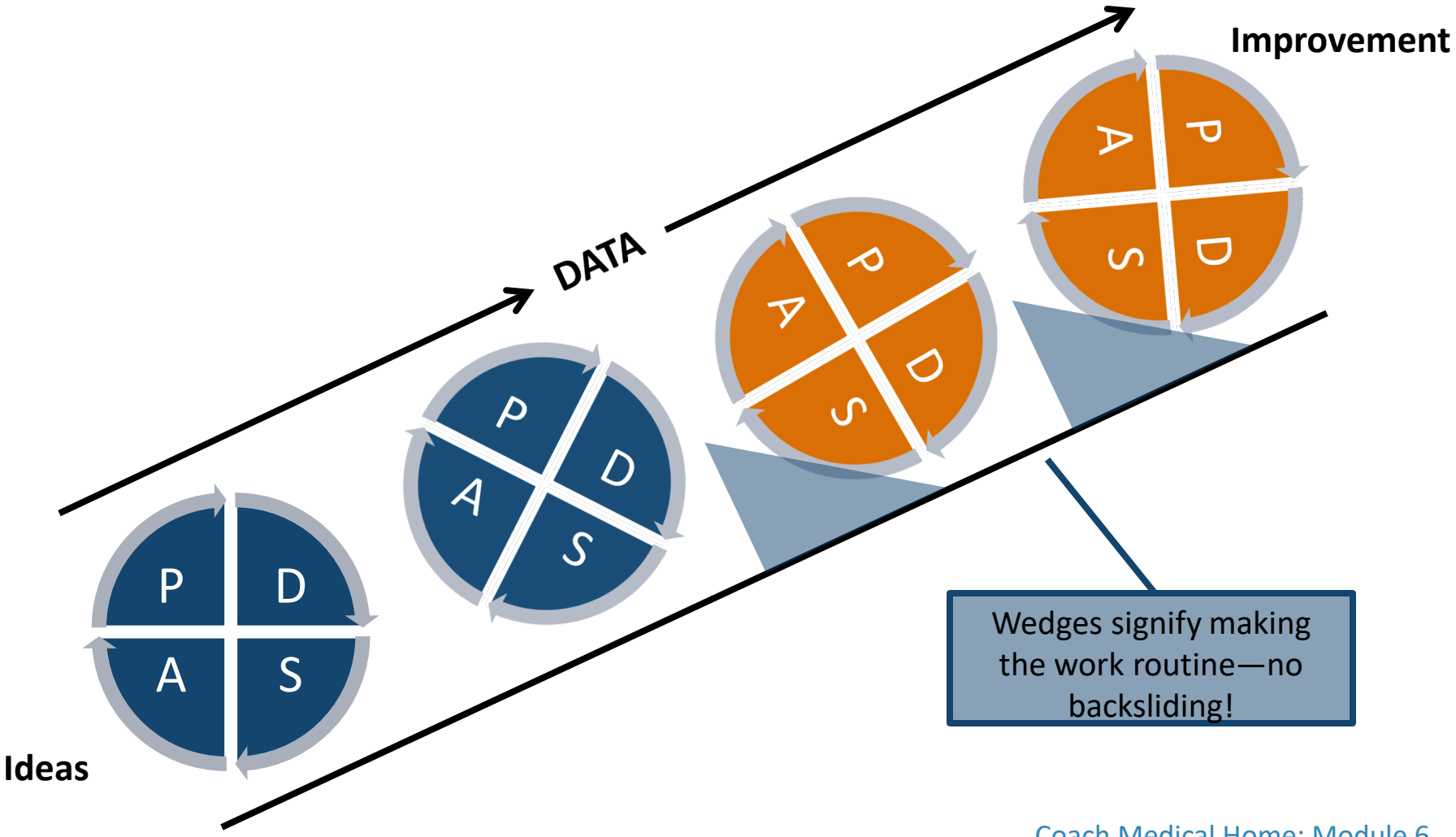


Deciding which changes to make permanent

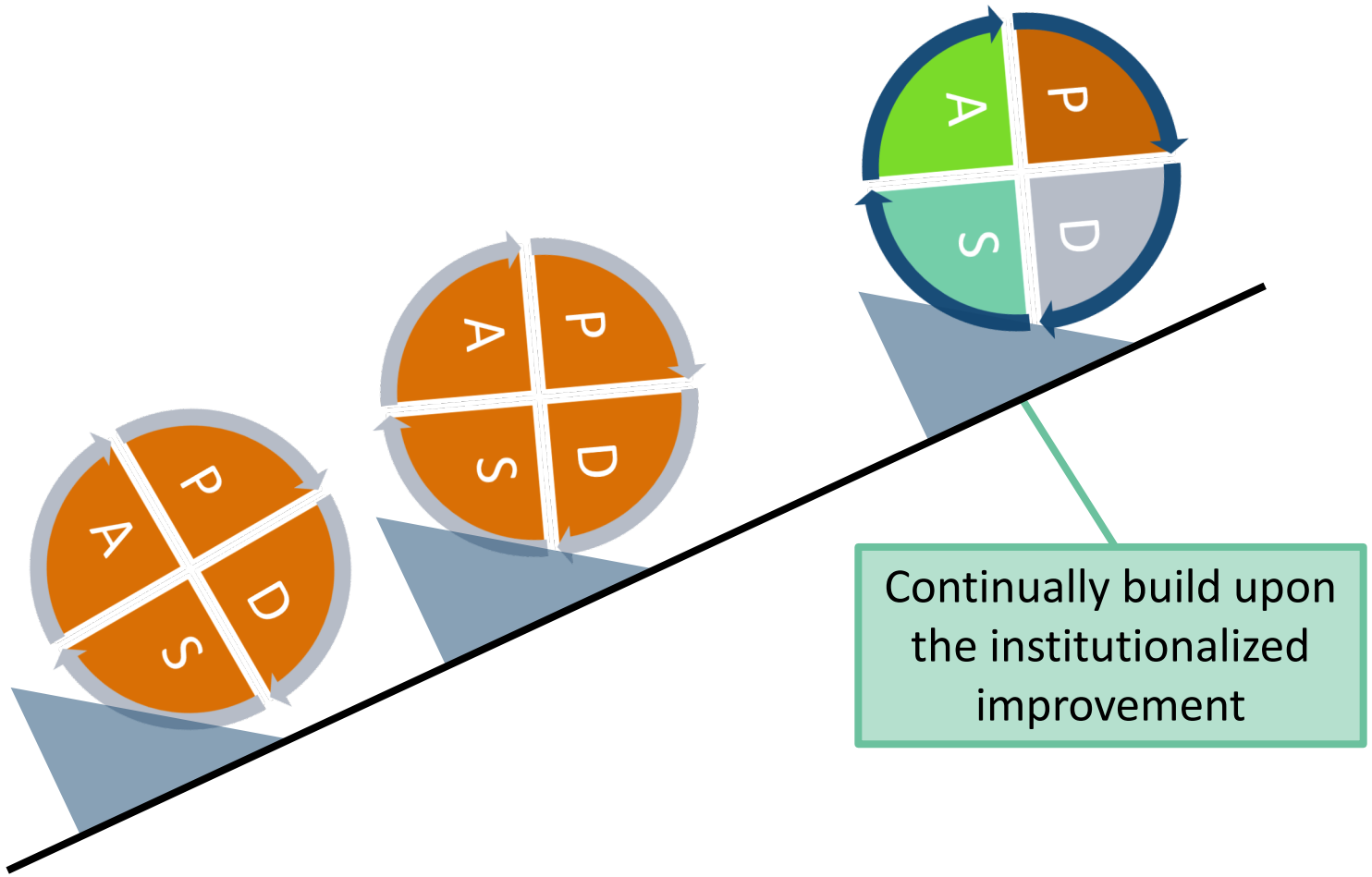
PDSA = plan, do, study, act



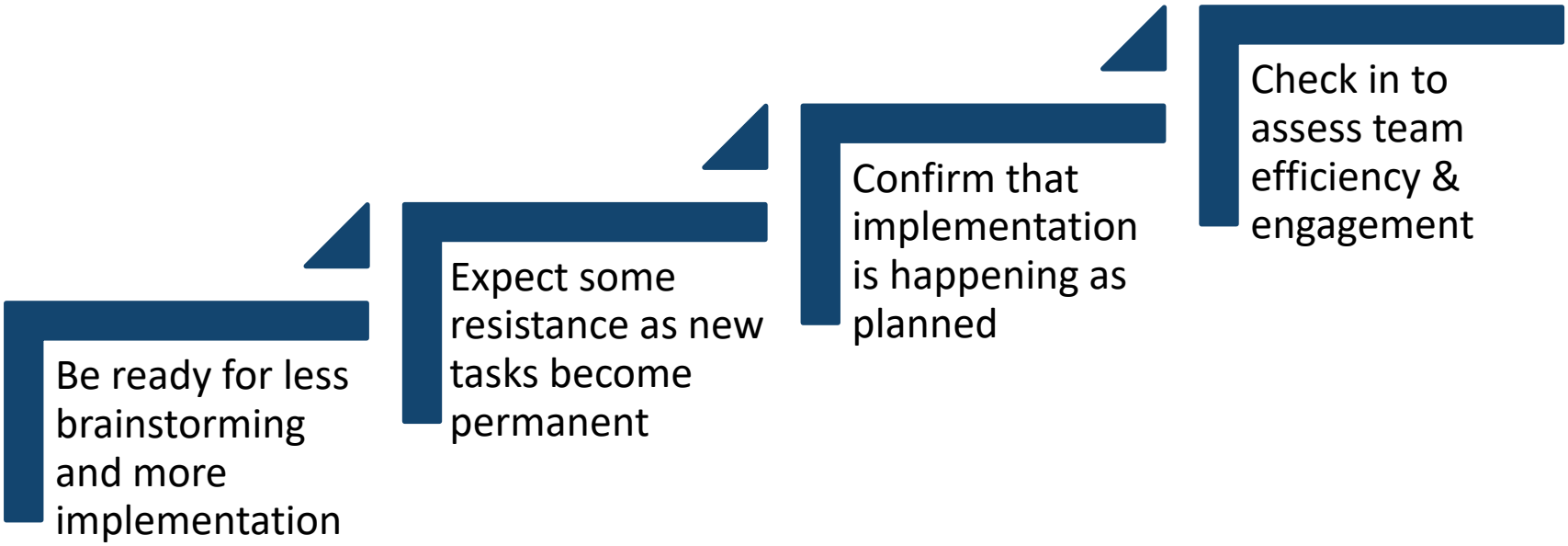
Holding the gains through standard processes and routine work



Improvement is continuous



Change management and monitoring



After the coaching period is over

Keep moving forward by:



Documenting standard work



Continuing staff training

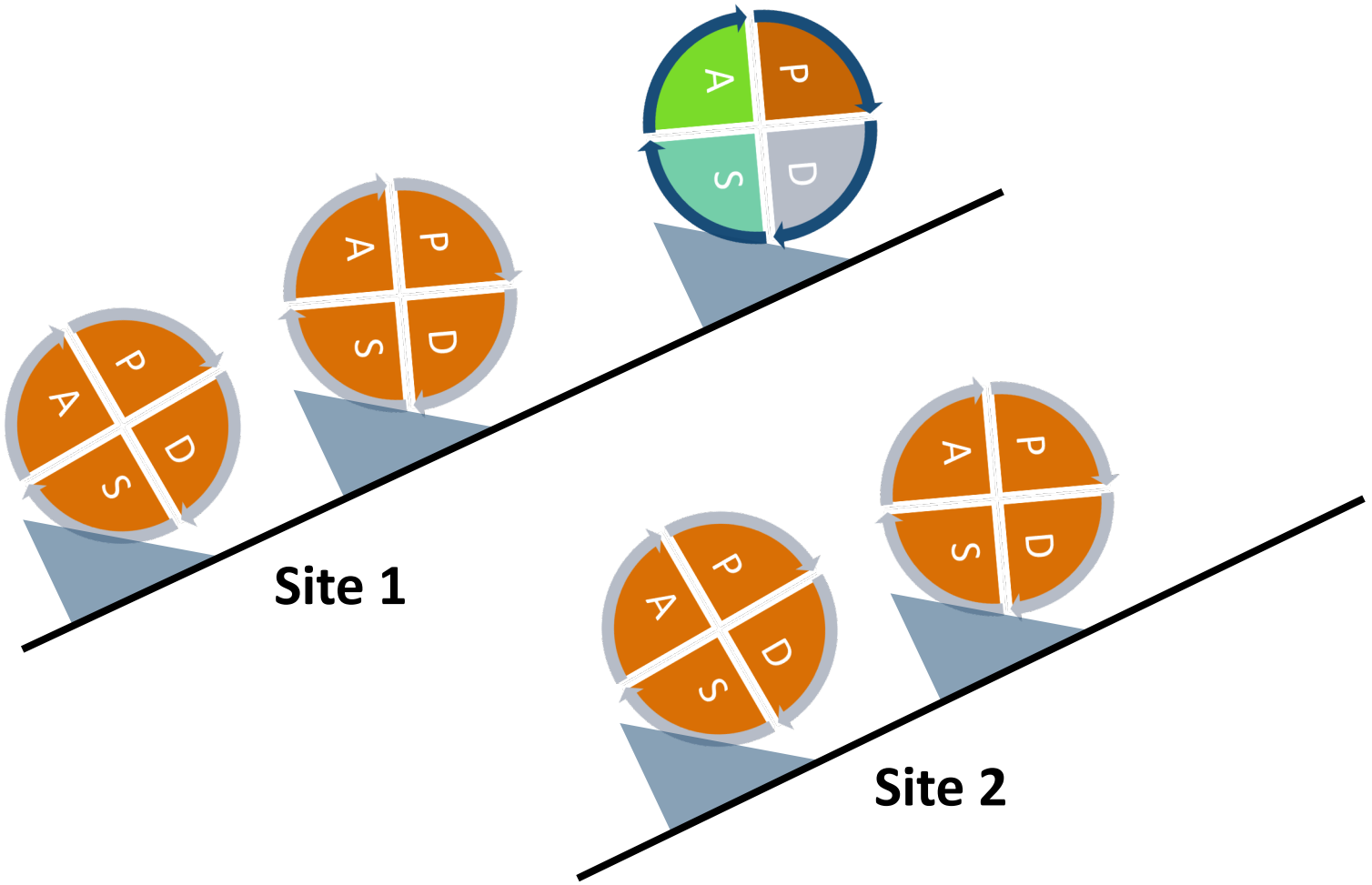


Celebrating success

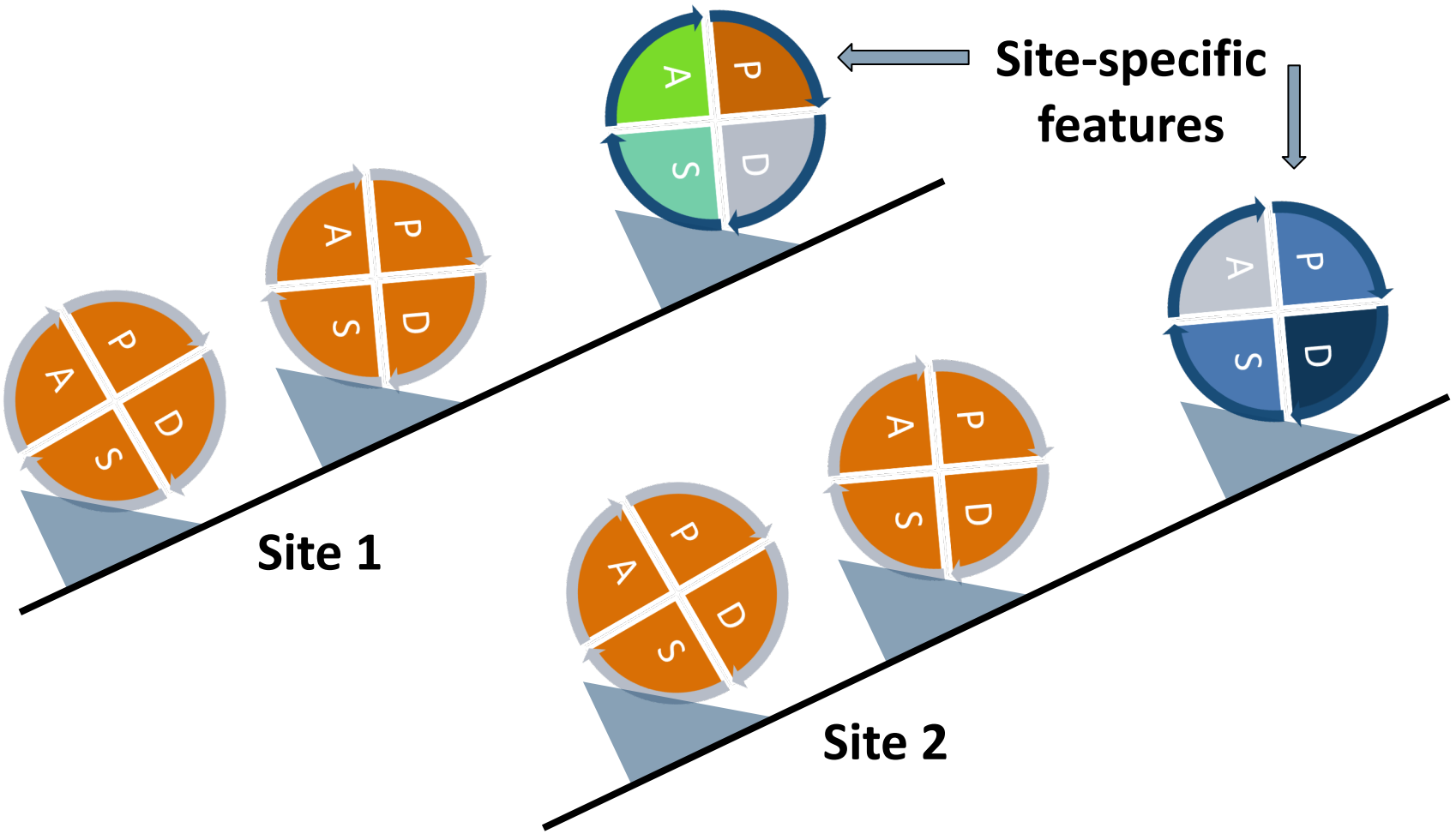
Section 2

Planning for spread

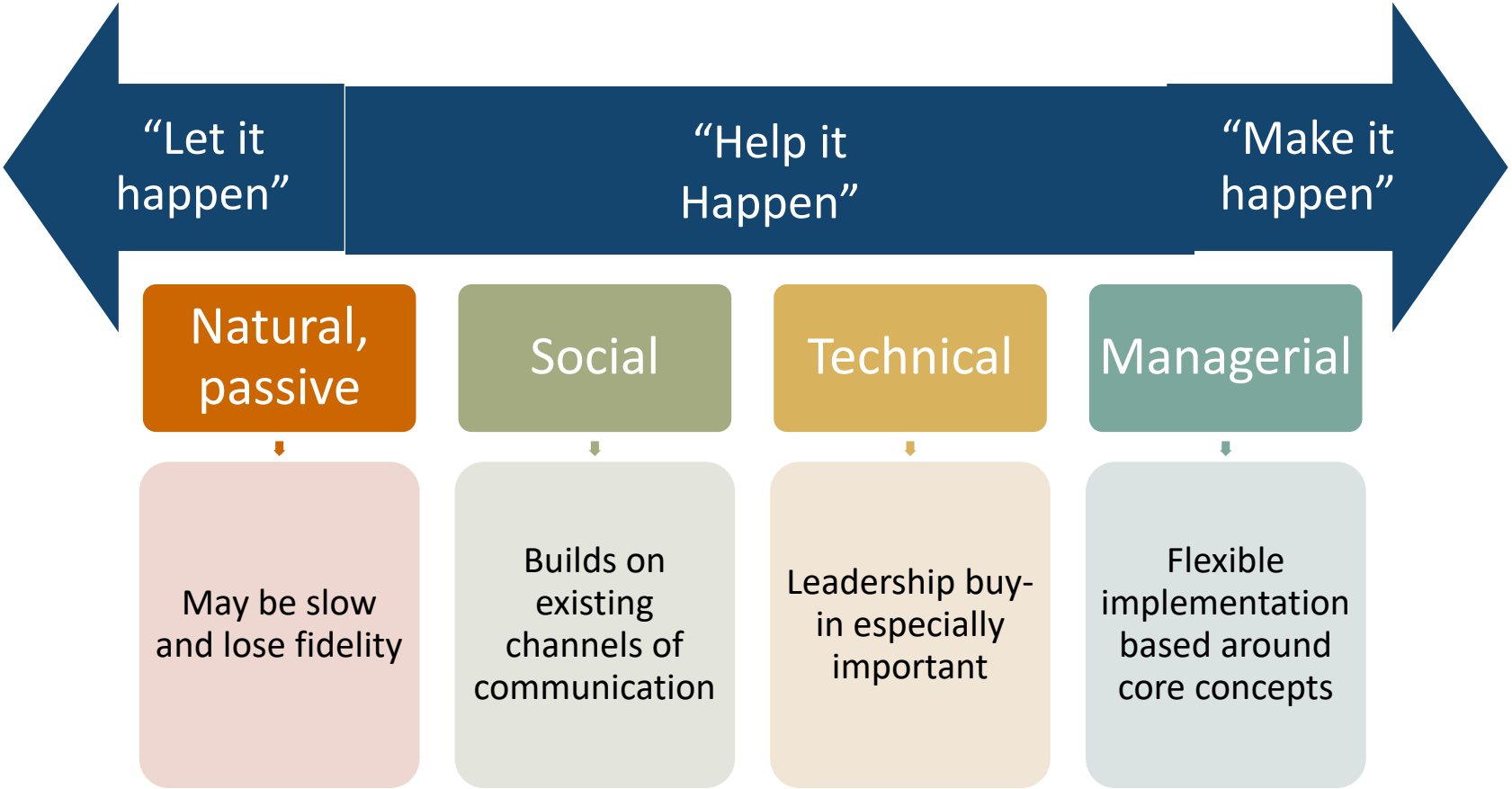
Spread exports the essential components…



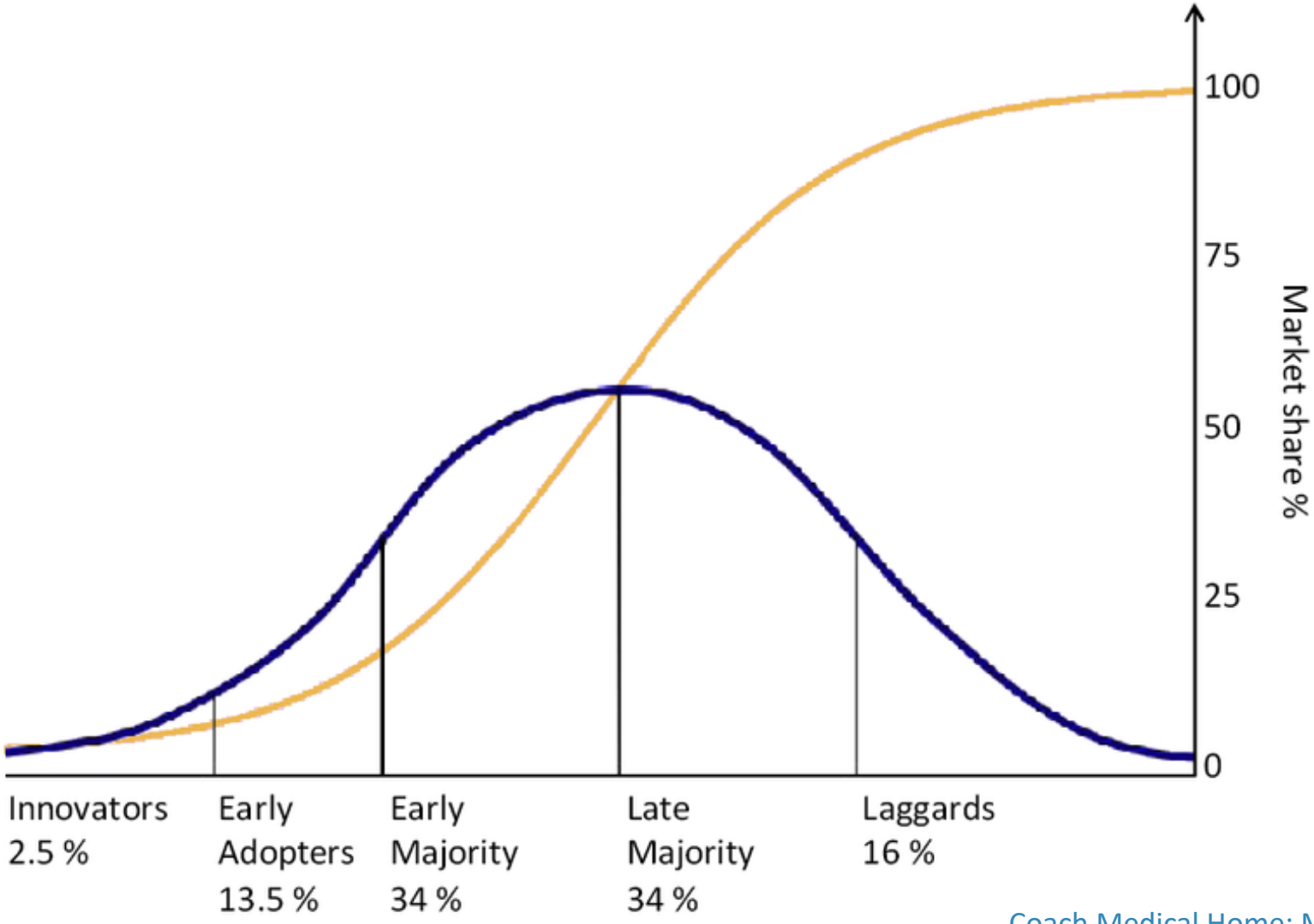
…but leaves room for customization



Spread can happen in different ways



Draw on Roger's Theory of Diffusion to inform your planning



Factors that make spread successful

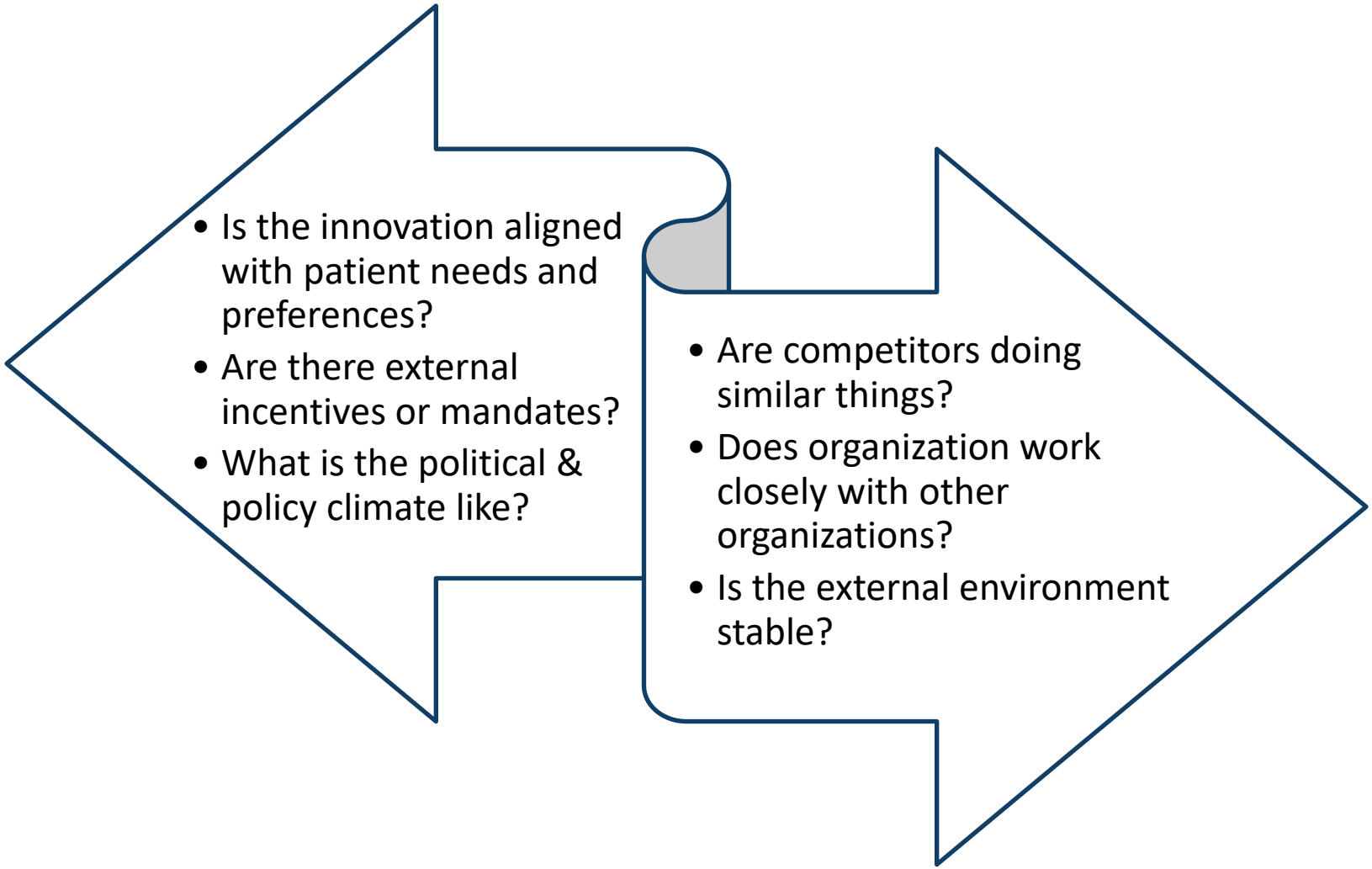
The innovation…

- Is widely perceived to have relative advantage over other interventions.
- Is compatible with existing norms & values, and risks are manageable.
- May be complex, but can be split into manageable parts.

All team members…

- Can try the innovation before adopting it—and can adapt it to some degree.
- See the benefits of the innovation in a reasonable timeframe.
- Receive appropriate knowledge and training.

External environment: factors that influence spread



Internal influences on spread

Is leadership informed, supportive, and actively engaged?

Is the innovation ready to spread, and is the system ready for the innovation?	Is the organization small and nimble, or large and regimented? (Change may be easier, but less lasting in the former.)	What is the innovation "climate"? Are staff up to the challenge or at their capacity?

Action steps for spreading

Package	core components & the measurement strategy to accompany them
Involve	team members in all stages: planning, engagement, execution, and communication
Allow	sites to adapt around the core concepts
Communicate	proactively and continuously
Check	and adjust as needed

Section 3

Case study: Group Health's PCMH

An overview of Group Health's PCMH experience

Group Health Cooperative is a Seattle-based integrated health care system serving more than 640,000 members.

Group Health's spread strategy included making significant staffing changes to support the PCMH.

2007-2008: PCMH prototype at a Seattle area clinic



Significant reductions in cost of care



Significant reductions in staff burnout



All 26 primary care clinics were transformed to the PCMH model by early 2010

Spread properties: The Group Health experience

Relative advantage?	Compatible with existing norms & values?	Risks?
• Compared to current state—no alternatives to PCMH were considered.	• Consistent with values of primary care & having manageable work lives.	• Compared risks of doing the intervention (losing money invested) to the risk of not doing it (losing the workforce, becoming less competitive).

Spread properties: The Group Health experience (cont.)

Can users try it on a limited basis before adopting?	How quickly are the benefits seen?
• Three clinics trialed all the spread interventions to refine them before spread to all clinical sites.	• Through visual display systems, all users were able to see the results right away.

Group Health's four practice change modules

Virtual medicine	• Secure e-mail & phone visits promoted as alternatives to office visits
Chronic disease management	• Team approach using standardized care plans, treatment intensification protocols, referrals, follow-up plans, and patient engagement strategies
Pre-visit preparation	• Identification of care needs before phone & office visits using systematic chart review and visit planning
Outreach	• Systematic outreach for unmet care needs (prevention, poorly controlled chronic illness), hospital & ED/urgent care follow up, medication safety