
AHRQ's Primary Care Practice Facilitation Forum

New & Noteworthy

PCMH Resource Center

The primary care medical home, also referred to as the patient centered medical home (PCMH), advanced primary care, and the healthcare home, is a promising model for transforming the organization and delivery of primary care.

We provide implementers, decisionmakers, and researchers with access to evidence-based resources about the medical home and its potential to transform primary care and improve the quality, safety, efficiency, and effectiveness of U.S. health care.

Please visit us at <http://pcmh.ahrq.gov>.

This electronic newsletter continues our efforts toward building a learning network for individuals with an interest in practice facilitation. We will use this listserv to share questions and answers submitted by learning forum members, as well as resources, research articles, and events of interest to the community.

Key Concepts in Practice Facilitation:

Mapping and Redesigning Workflow

How to Encourage Primary Care Practices to Develop Quality Improvement Infrastructure

The Practice Facilitation Handbook: Training Modules for New Facilitators and Their Trainers defines workflow as a series of steps that accomplishes a particular task. In other words, workflows show how the work actually gets done. The process of workflow mapping involves documenting the specific steps and actions needed to accomplish a particular task. By helping practices map workflows, facilitators can make it easier to improve processes to increase efficiency, reduce errors, and improve outcomes in primary care practices.

When creating a workflow map with a practice, it is essential to map what is *actually* happening instead of what the practice believes is happening or wants to happen. Therefore, each individual involved in a process should take part in mapping that process. Observing complex processes in action can also help with mapping them. An example of a workflow map for a lab result follow-up can be seen [here](#), and a detailed guide to workflow mapping can be found in the [Module 5 Appendix](#) of *The Practice Facilitation Handbook*.

After workflows have been mapped, they can be redesigned to improve performance and increase efficiency. It is important to have all key players involved in workflow redesign since redesigning one workflow may affect another work process. Redesigned workflows may require shifts in staff roles, responsibilities, and time allocation. As a result, there may also be a need for changes to policies and procedures, job descriptions, training, and accountability or reporting systems.

Facilitators should also support practices in implementing these new work processes and evaluating their impact. As a facilitator, the goal is to build practice capacity to engage in these processes in the future, as understanding and modifying existing workflows is an essential component of any improvement process.

For more information on how to help primary care practices map and redesign workflows, see [Module 5](#) of *The Practice Facilitation Handbook: Training Modules for New Facilitators and Their Trainers*. You can download a [PDF copy of the entire handbook](#) free of charge at the PCPF Resources page of AHRQ's **PCMH Resource Center** (<http://pcmh.ahrq.gov>).

Relevant Resource:

AHRQ's Workflow Assessment for Health IT Toolkit

As many practices work to implement different forms of health information technology (health IT), it is crucial to recognize the impact that this technology can have on both clinical and administrative workflow. Health IT provides information that can assist practices and facilitators in reorganizing and improving workflow. The Agency for Healthcare Research and Quality (AHRQ) has produced a [Workflow Assessment for Health IT Toolkit](#) designed for individuals and practices interested or involved in the planning, design, implementation, and use of health IT. This toolkit includes educational presentations that discuss workflow and its assessment, tools for collecting and analyzing workflow information, and links to sources for more information on workflow, workflow tools, and health IT.

This toolkit and other health IT-related tools and resources are available at no cost on AHRQ's [Health Information Technology portal](#).

Perspectives from the Field

How should primary care practices go about redesigning work processes and workflow to improve quality of care?

Below is a response from Shinyi Wu, PhD, Assistant Professor of Industrial and Systems Engineering at the University of Southern California:

“Primary care teams may lack the expertise to identify effective ways to improve their clinical processes. This gap can be filled by practice facilitators and by tools that help guide primary care teams through process improvement. The practice facilitator helps the team create a plan for improving quality of care by sharing best practices and lessons learned from other organizations’ improvement efforts. This plan, combined with discussions on current practices, helps primary care team members better understand how their own practice compares to the ideal and where there is room for improvement and opportunities for change. The practice facilitator guides the team in observing and defining work processes and workflow, assessing needs, and gathering baseline data. When the practitioners are ready to redesign their work processes, the practice facilitators help them plan for change by encouraging them to set goals, suggesting ideas, or providing menus of possible strategies or innovations. Facilitators can also aid practices in creating an implementation plan and assist if obstacles arise.

Tools can also be an effective catalyst for change. For example, the Chronic Care Model (CCM) has become increasingly recognized as a promising solution to address the growing demand and suboptimal quality of chronic illness care—one of the most pressing challenges of our time. To help more health care organizations implement CCM, AHRQ contracted with Group Health’s MacColl Institute, RAND Health, and the California Health Care Safety Net Institute to develop a toolkit. The toolkit provides a step-by-step practical approach to guide primary care teams through quality improvement, and it introduces the sequences and describes the specific practice changes involved in CCM implementation. It also provides more than 60 commonly used quality improvement tools that can be used to redesign work processes for chronic illness care, and includes examples from practices that have profited from quality improvement. The toolkit, [Integrating Chronic Care and Business Strategies in the Safety Net](#), and other primary care resources can be accessed on AHRQ’s [website](#).”

(The views expressed here are those of Dr. Wu and do not necessarily represent the views of AHRQ. No statement in this newsletter should be construed as official position of AHRQ or of the U.S. Department of Health and Human Services. Dr. Wu co-authored [Integrating Chronic Care and Business Strategies in the Safety Net: A Practice Coaching Manual](#).)

What Do You Think?

Dr. Wu has suggested one toolkit for improving work processes and quality of care in primary care practices. **Do you have tools and resources that you think are helpful for primary care practices?**

Please join the discussion by sending your thoughts to us at PracticeFacilitation@mathematica-mpr.com. We look forward to receiving your responses and sharing them in the next newsletter.

Managing Your Account

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