

Coach Medical Home

*Strategies & tools
to support
patient-centered
medical home
transformation*



MODULE 5: Building Learning Communities



This is the fifth module of Coach Medical Home—a six-module curriculum designed for practice facilitators who are coaching primary care practices around patient-centered medical home (PCMH) transformation. Based on the [Safety Net Medical Home Initiative](#) Framework for Practice Transformation, these modules provide knowledge and tools coaches can use to support practices as they improve quality of care, become medical homes, and achieve PCMH recognition.

Each module has two components: a PDF handbook like this one and a companion PowerPoint® presentation also available on the Coach Medical Home website. The PowerPoint® slides can be saved, modified, and used in your presentations with practice leaders and others. The detailed notes in the handbook will help you learn more and link you to other useful resources. You may also find it helpful to use these notes to guide your talking points during presentations.

Visit www.CoachMedicalHome.org to download this and other modules—and to access dozens of helpful tools and resources.

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Learning objectives for this module

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After completing this module, you will know how to:

- Apply key principles of effective learning communities to PCMH transformation.
- Build a collaborative team to develop a PCMH learning community.
- Plan and implement effective learning sessions and action periods.
- Identify structures and practical activities that support learning communities.

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Increasingly, patient-centered medical home (PCMH) transformation efforts include both practice coaching and learning communities. By participating in a learning community, a primary care practice can reinforce improvement efforts, promote rapid testing of good ideas, and accelerate practice transformation. Being part of a learning community also helps both coaches and practice members develop themselves personally and professionally to best support transformation efforts.

This module tries to equip you with practical information you can use to build learning communities to support PCMH transformation. It includes coaching strategies and helpful tools from previous practice improvement initiatives.

Overview of contents

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1. What makes learning communities effective?
2. Getting started with a learning community
3. Creating effective learning sessions
4. Making the most of your momentum

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This module is divided into four sections that describe different components of the coach's role in helping practices use learning communities to support PCMH transformation.

Throughout this module, you will find coaching tips and links to useful tools to help you accomplish the action step(s) listed on that page. Look for the following icons on certain pages:



The light bulb icon points out key tips and insights that will help you in your role as a coach.



The toolbox icon points out tools you can access via the link provided, or on the "Module 5: Building Learning Communities" page of www.CoachMedicalHome.org.

SECTION 1

What makes learning communities effective?

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This section will help you understand what learning communities are and how they can help practices meet improvement goals, in this case PCMH transformation. It describes key principles of effective learning communities and the coach's role in coordinating the practice's engagement and participation.

Use the presentation slides, tools, and coaching tips provided to:

- Explain to a practice what learning communities are and what makes them effective.
- Develop your understanding of the potential roles coaches can play in a learning community.

What are learning communities?

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Groups of individuals or teams who:

Share common goals, values, or beliefs

Actively engage in sharing information and experiences to learn from each other

May work together toward a shared goal



Can include practice members & coaches

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Learning communities range from the informal to more structured organizations. They may gather for mutual learning and benefit, such as communities of practice within an organization that have lunch regularly to discuss cases, problem solve together, and bring in local experts. Quality Improvement learning communities typically decide on an area of focus and specify activities or changes that they wish to try, sharing the results of their efforts and problem solving.

An example of the most formal learning community is the Institute for Healthcare Improvement's Breakthrough Series Collaborative, which utilizes charters, change packages, aims and measures, and a structured meeting and reporting system. Many of the teaching points and tools within this guide are drawn from the work of the Breakthrough Series Collaborative.

Key principles of effective learning communities

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Culture of collaboration & respect

Defined scope

Leadership support

Proven QI methods

Shared ideas & lessons learned

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It's important for coaches and practices alike to understand what makes learning communities effective. **Adult learners need to learn with purpose in an environment of respect.** They also need to work collaboratively with other adult learners—building upon past knowledge, skills, and experience.

Other key principles of effective learning communities include:

- A defined scope that includes a charter, change package, aims, and measures
- Leadership support to ensure adequate resources are available to support success
- Proven quality-improvement methods, such as rapid cycle improvement, PDSAs, Lean methods, reporting
- Sharing ideas and lessons learned using effective communication technologies and involving staff, expert faculty, and community partners

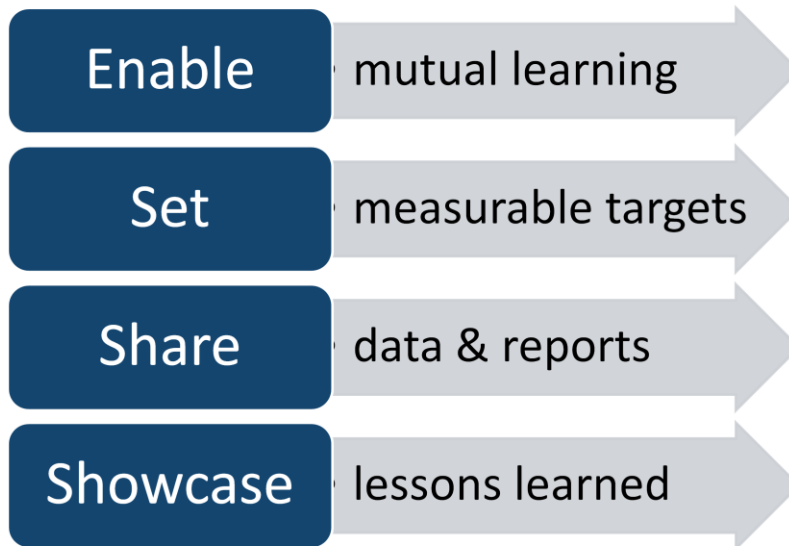


Coaches can support these principles by:

- Engaging leaders to set the tone for active learning and providing resources
- Teaching and encouraging curiosity by framing failures as the best opportunities for learning
- Providing guidance on aims, measures and QI methods to help teams judge when a change is an improvement

Lessons from evaluated learning communities

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Research on learning communities has shown that enabling mutual learning is integral to success.

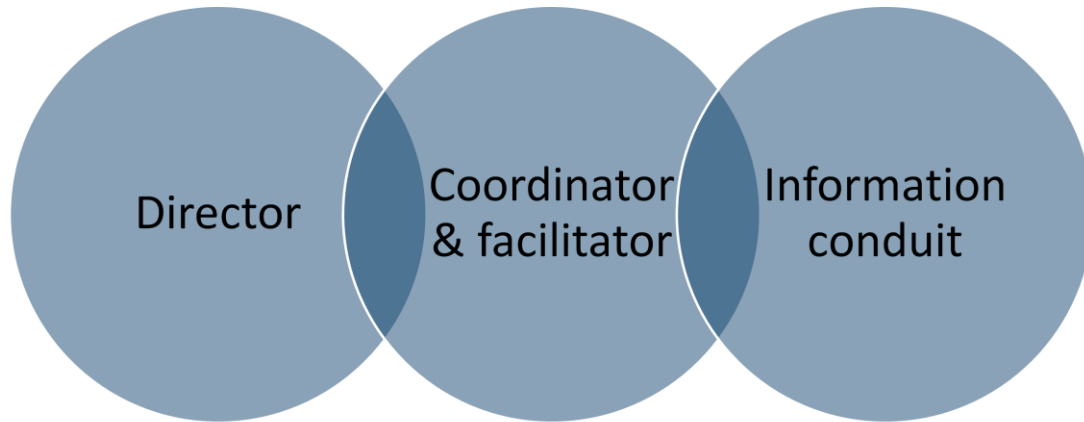
The opportunity to share experiences and apply what others have learned to your own context is the most productive way to spread innovation and make rapid progress toward a goal. In a successful learning community, coaches use every opportunity to tee up shared learning experiences in person, by phone or virtually. Generally, it is helpful to do so in the context of an overarching framework such as the Safety Net Medical Home Initiative (SNMHI) Framework for Practice Transformation (See Module 3: Sequencing the Changes).

Setting measurable and achievable targets helps participating practices or sites track their efforts and begin to draw conclusions about the effectiveness of changes they are making. Sharing data and narrative reports provides opportunities to compare results and share feedback about changes that enable more rapid learning.

Beyond information, showcasing lessons learned inspires teams to try new things based on the experiences of people like themselves—a powerful motivator to action.

Coaches have many potential roles in a learning community

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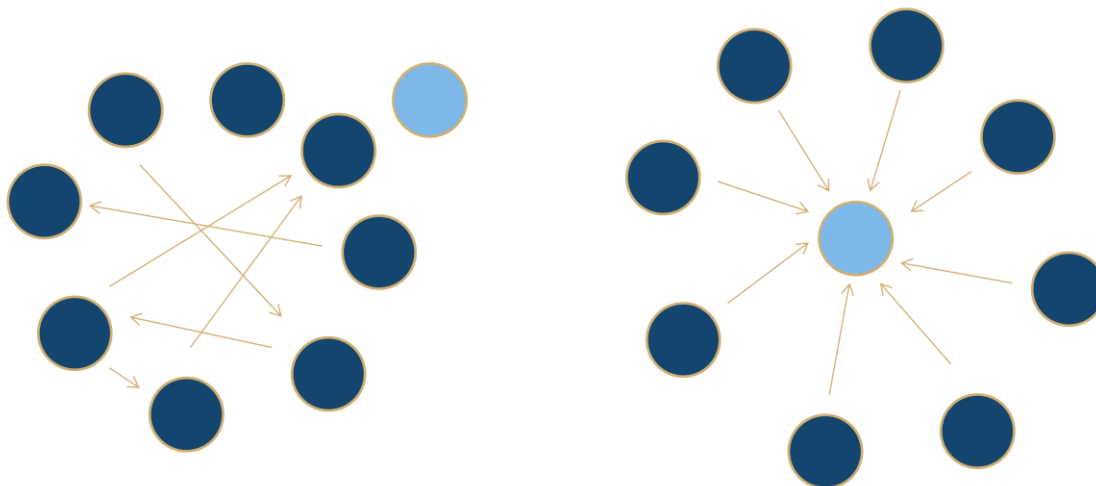
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Since PCMH transformation efforts usually combine coaching and learning communities, there are a variety of helpful roles you can play in a learning community:

- As director, you can work with community partners to assemble and convene a planning group, clarify goals for the project, develop learning materials, and plan learning sessions.
- As coordinator/facilitator, you can communicate the learning community's needs and common problems to help the group maintain focus. You can also note examples of successes and failures—sharing them with group and engaging exemplary teams in presentations and sharing their insights.
- As an information conduit, you can convey trends in performance and provide feedback to the planning group. During action periods, it's helpful to reinforce to the sites what is discussed at learning community meetings.

Think “guide on the side”

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Like a Border Collie,
not Sled Dog!

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All the potential roles a coach can play in a learning community focus on facilitating group interaction—whether among teams or among members of the same team. Don't feel like you need to be an expert in everything. Instead, think of yourself as a “guide on the side,” rather than a “sage on the stage.”



What does an effective facilitator look like?

- An empathetic and trustworthy presence
- Comfortable working behind-the-scenes
- Skilled in interpersonal problem-solving

SECTION 2

Getting started with a learning community

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Getting started with a learning community involves careful planning. The organizer may be a coach or a local or regional body such as a primary care organization. This section provides an overview of what to consider as you plan a learning community.

Building a PCMH Learning Community in your region

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There may be a number of organizations interested in or already actively working on PCMH initiatives in your region. An important first step as a coach is to gather state and community stakeholders together to create a shared, patient-centric vision for a PCMH learning community. It may be challenging to achieve a collaborative group of partners, and you may face lack of trust or a history of bad faith.



Keep in mind that it's important for organizations to feel trust and a balance of power, and help the stakeholders work together to:

- Designate a convener with deep commitment to putting the patient first.
- Understand how goals align and diverge.
- Establish a vision for success.
- Meet regularly and work toward open sharing of information.



Other important things to keep in mind: Open communication is essential. A respected leader with conviction about the quality improvement work can be a powerful force for collaborative partnerships. An organization or entity (e.g., governor's office, Medicaid office, etc.) that is committed to improving care for patients can be invaluable in solidifying community partnerships.



Learning Community Planning Questions

Memorandum of Understanding

Tips for Success: Working with Community Partners

(Tools available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Gaining leadership & management buy-in for learning communities

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Leadership involvement is central to the effective development of learning communities, and leaders should be brought on board early. Regional and local leader input on the design, structure, and content of the learning community helps ensure it will meet local needs. To build leadership support for and involvement in learning communities:



Discuss the costs as well as the benefits at PCA and other sponsor meetings so that the participant health centers can make informed decisions.



Develop a common message about the mission and values of the learning community to develop a shared vision among boards and other thought leaders. An “elevator speech” (a quick, precisely crafted message that describes the initiative) is a good way to do this.



Consider a separate track for educating senior leaders in the participating organizations to assure they understand fully the change concepts and implications for testing and implementation. Holding senior leader only calls provides an environment conducive to open discussion and learning at that level.



Invite leaders to attend learning community sessions to hear first hand and reinforce information from the learning community.

Create a planning and staffing “dream team”

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The planning group will develop the content, quality improvement strategy, and an overall charter for the project. Coaches can play a role organizing learning communities as part of the planning group or ongoing staff, depending who is organizing the learning community. To help organize a planning group:



Involve community partners and leaders. Start with local leaders who are respected and passionate about PCMH transformation, then find clinicians and others who share those qualities. The goal is to identify planning group leaders who are credible and connected to their community and who bring knowledge of important technical content to the table. They should also be able to effectively communicate ideas to their teams and have a strong desire to learn more.



Line up faculty and dedicated staff for the learning community. Keep in mind that you want to **include faculty who have expertise in each area of the change package.**



It's also critical for the planning team to arrange for **adequate resources for staffing.**



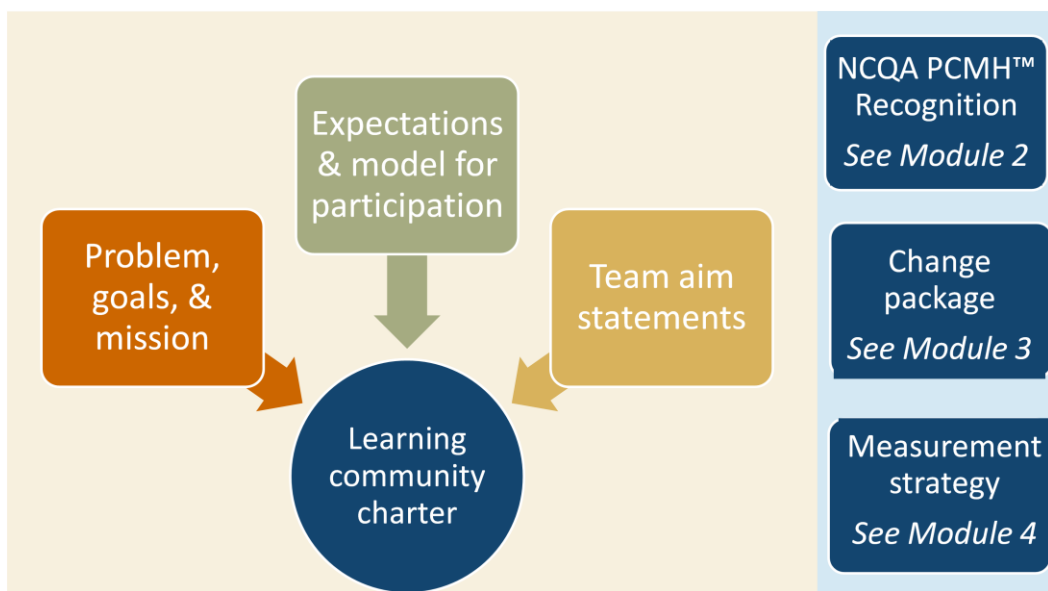
Getting Started Kit

Roles in a Breakthrough Series Collaborative

(Tools available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Defining the scope: Key content

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To define the scope of work for the learning community, start by developing a charter that clearly defines the problem, goals, and mission of the initiative. The charter will also set clear expectations for sites, Primary Care Associations (PCAs), lead PCAs, and the practice team and will provide a model for practice organizations to prepare for learning community participation. Team aim statements will help guide a more team-specific vision for the project. They also clarify shared goals—such as NCQA PCMH™ Recognition (see Module 2: Recognition and Payment) and help to define the measures the team will use to track them (see Module 4: Measurement).



You might ask each site to sign a memorandum of understanding that includes:

- Aim for transformational change
- Assurance of engaged leadership
- Appropriate membership on learning community team
- Participation in learning sessions, webinars and conference calls, listserv
- Test and apply change package
- Expectations about NCQA recognition
- Knowledge of stakeholders, local initiatives and potential partnerships



Aims and Goals Worksheet

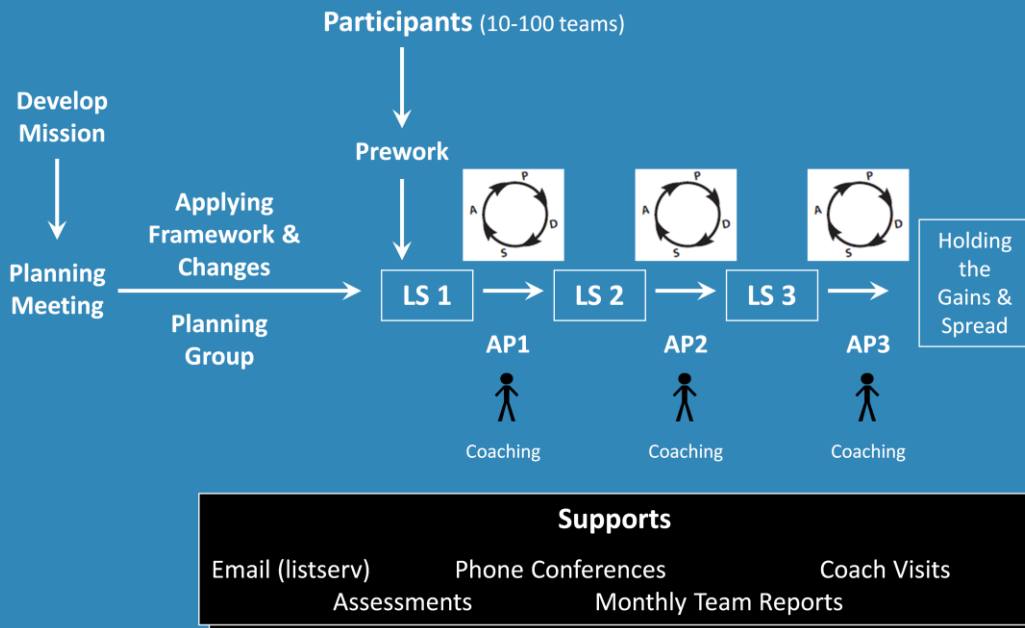
Sample Team Aim Statement

Sample PCMH Team Charter

Project Team Charter Template

(Tools available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Example learning community process



LS – Learning Session

AP – Action Period

© 2003 Adapted from Institute for Healthcare Improvement

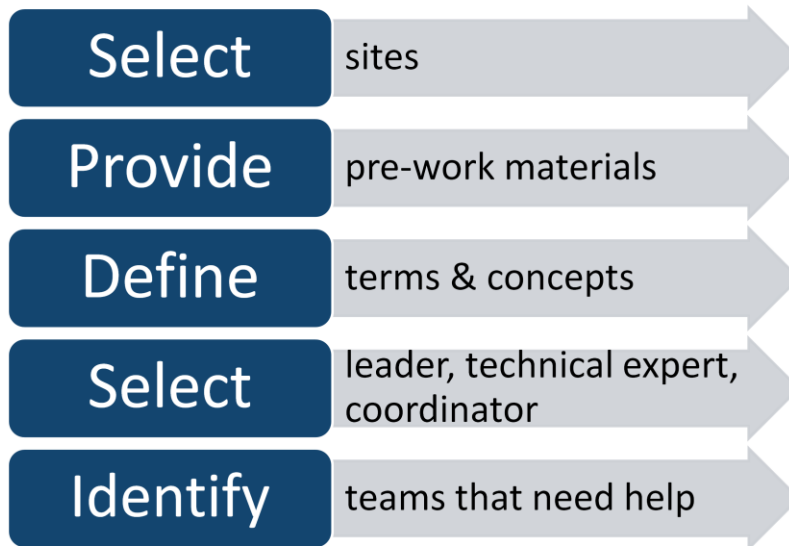
Learning communities take different shapes but follow the same general structure: planning, recruitment, prework, learning sessions, and action periods. This graphic depiction of learning community process is adapted from the IHI Breakthrough Series Collaborative, with the addition of coaching interventions in the action periods.

Learning sessions, whether in person or virtual, provide the main avenues for presentation of content and sharing among teams. Not all learning communities will have three in-person learning sessions, and some may be entirely virtual. Some learning communities depend on smaller, more local gatherings and are able to meet more frequently for shorter periods of time. The value of the learning community is most evidenced in group sharing, whatever form it takes.

Intervals between the learning sessions might be called “action periods.” During action periods, teams are actively testing and implementing changes using PDSA cycles, Lean methods, or another QI strategy. It’s helpful for action periods to include steps to support individual teams, such as as coaching visits, calls, or emails. Shared learning continues through email listservs, conference calls and other mechanisms. Posting monthly reports of both data run charts and narrative descriptions of change efforts provides constant and easy access to information about other teams.

Prepare sites for learning community engagement

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Once you have selected and recruited your sites, you're ready for orientation. The following steps will help you effectively orient and prepare sites to participate in the learning community:

- Provide pre-work materials and connect sites with phone lists, listserv(s), etc.
- Define aim statements and introduce the notion of a team charter.
- Select a system leader, a technical expert, and a day-to-day coordinator.
- Identify teams that need help via pre-work calls.



To begin the learning community with a strong kickoff, it is important to adequately prepare teams to begin work. Determine a firm timeline for all events at the outset to allow teams to schedule time away from practice (see Module 3: Sequencing the Changes). Use the charter or Getting Started Kit to give teams a timeline of activities leading up to the first learning session or another kickoff event.



IHI Breakthrough Series Improvement Guide

<http://www.ihl.org/knowledge/Pages/IHIWhitePapers/TheBreakthroughSeriesIHIsCollaborativeModelforAchievingBreakthroughImprovement.aspx>

SECTION 3

Creating effective learning sessions

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Effective learning sessions require careful planning, a well-organized agenda, and good facilitation. These work together to support the true key to effective learning sessions: participant interaction that enables them to learn from each other. Use the tips and tools in this section to create effective learning sessions.

Things to keep in mind before your first learning session

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The coach should:

Try to understand each site's successes and challenges

The agenda should:

Include ample time for team strategizing and planning

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When any learning community gets underway, the participating teams will be at different stages of testing and implementing different areas of the change package. **An important first step for you as the coach is to ask each team about their successes and challenges.** Understanding their experience will help you find teams that can contribute their experience in a more formal way.

Learning sessions are opportunities to inspire, promote exchange of ideas and best practices, and dig deeper with other teams about their experiences. Coaches and practice team members can then incorporate these ideas and insights into their own transformation efforts. During the learning session, teams need time on the agenda to strategize about how to tailor the lessons learned to their own environment while the concepts are fresh and they are enthusiastic about the ideas.

Planning time for teams is also crucial. The agenda should provide almost equal time for presentation and discussion, reports or demonstrations, and team planning time. The goal for these sessions is to support the teams in making actionable plans for changes.



Asking a question like “What can we do by next Tuesday?” is a way to help teams keep action plans small and specific for maximal learning.



Example Virtual Learning Session Agenda

National Quality Center Game Guide

Project Planning Form

(Tools available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Learning session principles

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Make team time a priority

Use
interactive
methods &
various
formats

Engage
participants
as teachers
right away

Set an
urgent pace

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From the IHI Breakthrough Series Collaborative, we've learned that **providing ample team time** is one core principle that supports effective learning sessions. What are the others?

Use interactive methods with a mixture of formats, such as:

- Plenary sessions: Everyone hears the same news and is in the work together
- Breakouts: Small group discussions, connect to others, invest in the work
- Team meetings: Process and planning time, coaches and faculty circulate
- Storyboard sessions/social time: Connect with others and collaborate

Engage participants as teachers at the outset by minimizing talking heads. In learning session 1, experts may present most of the content, but teams should present more and more at later sessions.

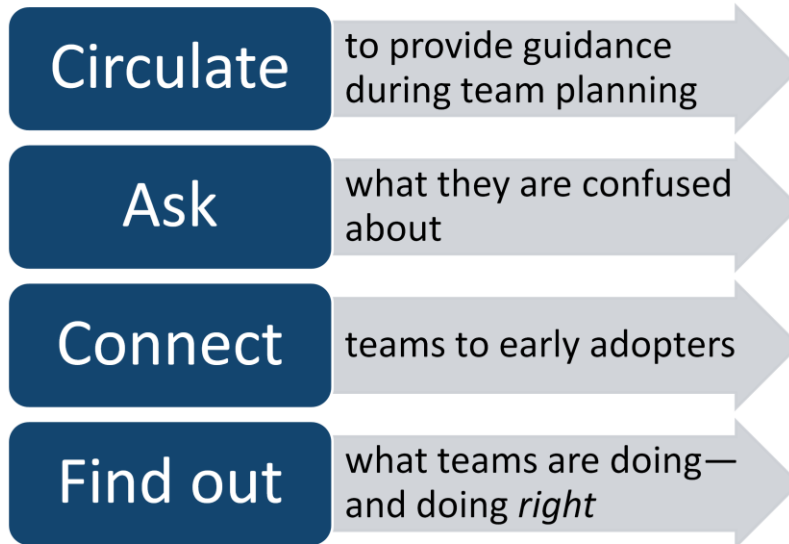


Other tips for promoting effective learning sessions:

- Presentations should contain brief, actionable content from change package and QI strategy.
- Pair presentations from experts with stories from teams wherever possible.
- Use exercises, worksheets, and tools to support action planning.
- Connect QI strategies to change package by offering examples from different teams.
- Set an urgent pace by balancing excitement (e.g., improving care) and anxiety (e.g., NCQA paperwork deadline).

Learning session coaching

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Team interaction is often the most valued aspect of learning sessions, but to be effective, **topics for interaction need to be “teed up” through presentations, demonstrations, or activities which clarify a change or best practice.** In addition to planning and facilitating learning sessions, you will find some valuable opportunities to meet with teams to do actual coaching.



It’s helpful to try to connect all teams to the work of early adopter teams. Early adopters are more credible, more “like us,” than faculty in many cases, so showcasing their work is important. The changes must be associated with data that shows improvement, so be sure to ask “what kind of results are you getting?” To prepare for learning sessions, get information about successes and learning opportunities that can be circulated among the teams, or that need addressing in more detail to overcome confusion.



You can also circulate during team planning sessions to:

- Provide guidance on aim statements, for example: Do they align with system initiatives? Are they specific enough?
- Demonstrate QI methods.
- Demonstrate learning behavior, for example: asking questions.

SECTION 4

Making the most of your momentum

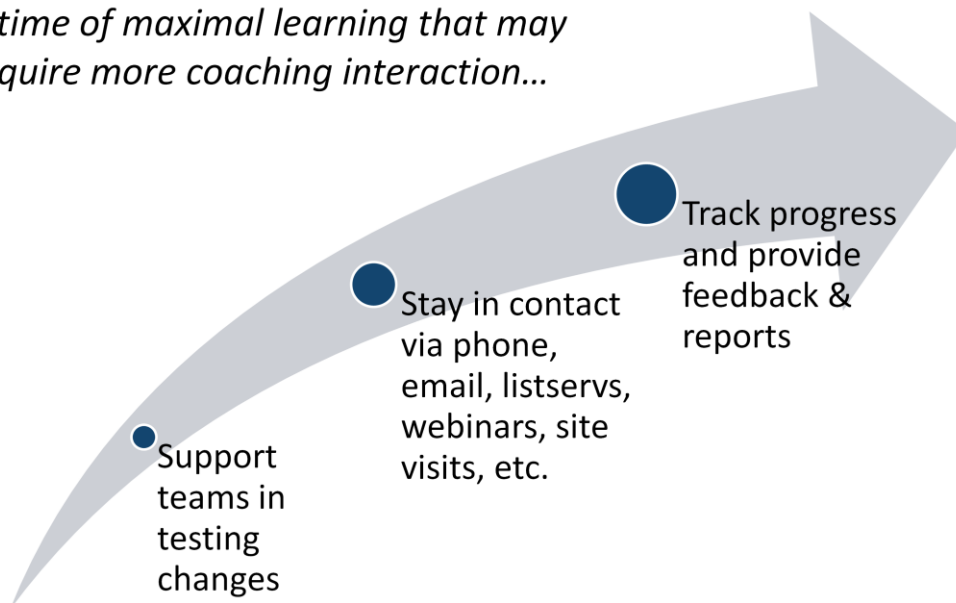
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Use the tips and tools in this section to develop a plan for coaching learning community participants in the action periods between learning sessions.

Action periods: Where the real action is

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A time of maximal learning that may require more coaching interaction...



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Action periods are times of active learning and testing changes based on ideas from the learning community sessions. In other words, action periods are when the work actually gets done, and teams may have the greatest need for individual coaching during these times. Interaction with other teams continues with conference calls, listserv conversations and requests, and sharing of data and narrative reports of changes in progress.



As a coach, you can help maintain momentum by:

- Having regular phone and email communication with each practice site.
- Coordinating round-table calls with each practice to share successes and best practices, and to seek advice from others on challenges and barriers.
- Share data reports for regions and the state.
- Ensure all clinics are aware of other initiatives that impact them.
- Use team reports to track improvement in team progress. In addition to the Project Assessment Scale, you can use the PCMH-A for this purpose (See Module 3: Sequencing the Changes).



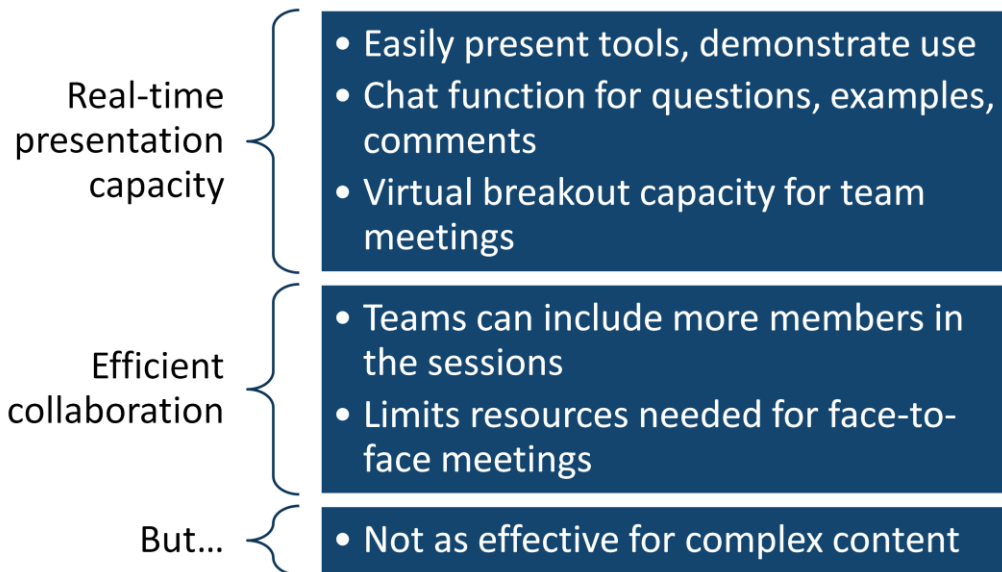
Sample Webinar Faculty Agenda

Project Assessment Scale

(Tools available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Webinars and virtual learning sessions

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Webinars have become a common way to give real-time presentations over long distances to many people. They also allow more team members to be included in a session. In-person meetings are best for providing motivation for change/inspiration and “curbside consults” from person to person. Providing an environment for a team to work together while receiving content, education, and support is more easily done face to face, but technology is now available to provide breakout “rooms” within a virtual learning session or webinar to allow separate team time.

It’s tempting to think that practice teams will sit together in a break room at their clinic and listen to a webinar, discuss it, and create an action plan immediately after—but this tends not to happen without direction and facilitation. At in-person events you control the learning environment, but on webinars, attendees are more likely to get distracted by competing priorities. **Some learning communities ensure more effective participation by investing in preparation time with coaches at each site to facilitate the sessions during webinars.**

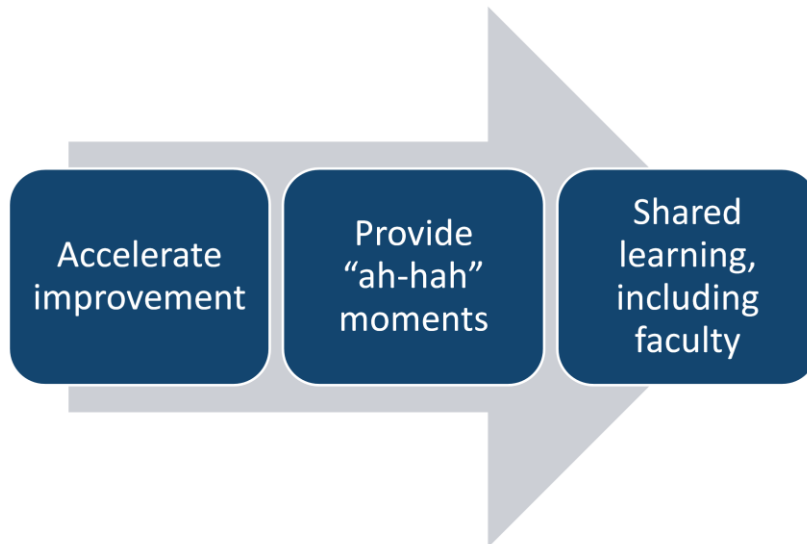


Tips for Success: Webinars and Virtual Learning Sessions.

(Tool available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)

Site visits: Big investment, big payoff

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Site visits offer a rich opportunity for sites to experience care delivery innovations in real time, talk to those who are practicing in new ways and view teams working together in action. Site visitors often have transformational experiences, “ah-hah” moments that inspire them and help them see new possibilities for themselves and their teams.

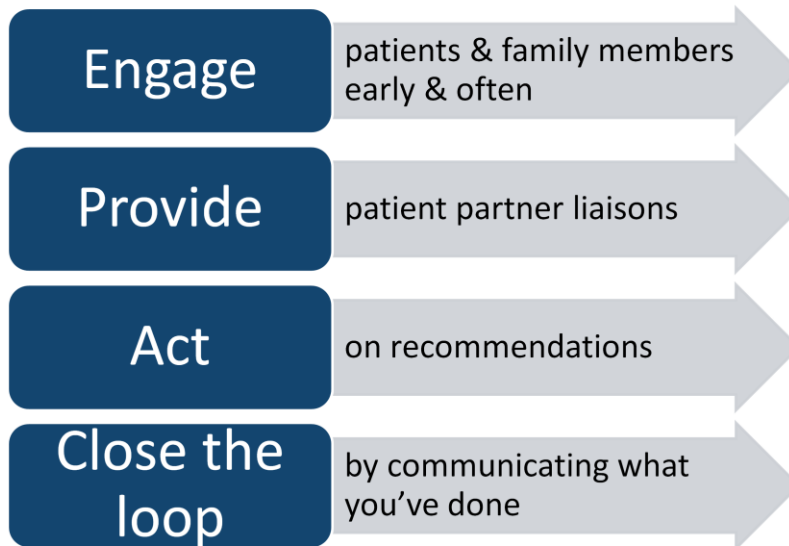


Tips for successful site visits:

- Develop an agenda collaboratively with the site.
- Plan carefully for the right experiences, such as shadowing specific roles, QI meetings, patient groups, leaders .
- Choose the right size and right people for your site visit team to maximize effectiveness.
- Provide team time for recaps and reviewing lessons learned.
- Be a good guest.
- Consider a virtual site visit (using Skype and other methods) to interact with sites.

Patients as partners in quality

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Patients and family members can provide important feedback that speeds the decision-making process for PCMH changes. The Humboldt Del Norte Primary Care Renewal project utilizes patient partners in transforming practices into PCMHs. Each participating practice has a patient partner from its panel of patients, who work both with the practice team and together as an advisory group to provide feedback to the project. Patient partner liaisons orient and elicit feedback from the group, then digest and report it at the learning sessions.



Recommend that the practice:

- Engage patients and family members early and often in planning and implementing changes.
- Provide patient partner liaisons to orient and support patient partners.
- Close the loop with patient partners by letting them know how you have acted upon their recommendations.



Humboldt Patient Partners Toolkit

(Tool available at www.CoachMedicalHome.org in Module 5: Building Learning Communities)