

## Diagnosing Practices and Mapping Change

Presented by Jessica Williams, BEd, PCMH-CCE

JESSICA REED WILLIAMS

I printed the assessment that you see here. It should be on the left hand side. It's a tool we've had it for a while, but we still find it pretty relevant. So sometimes you just need to bring out that paper and you know, go in there and walk around the practice and answer those questions. That's one of the tools that we use. I can send this electronically, of course as well. But one of my favorite tools is from AMA "Steps Forward" and it is their practice assessment tool. Has anyone ever seen or utilized this? One?

GABBY VILLALOBOS

OK.

JESSICA REED WILLIAMS

This is, I hope this is a game changer for y'all today. This is free, this is free. So you would go in here, and this is really hard to do with my back turned to you. I realize, I'm sorry. And you know, click practice assessment tool. And there are a series of questions that the practice can answer. You can do it virtually with them, you can go on the practice or they can do it and send the results to you. So this is a really good free resource that can be used and we're gonna come back to that in just a minute. Now, here's the trick. OK. So, and then finally, I think also technology is an assessment that we think, oh, they've got an EHR they're good to go. But are they maximizing it? In your packets, another one of the tools I really like, which is AHRQ's post-EHR implementation assessment. Anybody here ever done that one? No. OK. Again, all these are free tools, right? So sometimes you know, a practice needs it and then sometimes you need to find something that brings value or you can strengthen that relationship with. And I think looking at their technology is an area looking at: is there opportunity for telemedicine? Are they maximizing the communication channels that they have in there? I can't believe how many practices I work with that just don't optimize the patient portal and that alone could save so much time. OK, so now we've diagnosed what's going on. I've showed you a few, few tools that can help you with this. Now, we need to help them decide what they want to work on. And one of my favorite tools that we use in my region is this right here. It's just called a "Now-Near-Far" chart. And it's a way to organize all the things that come out of that assessment, right? So a lot can show up. I need to maximize the portal, "Oh gosh, our wait times are bad." "Our patient turnover." How are you gonna do all this? You could do a formal plan and this is just real informally. And we use this actually also strategically plan with our practices a couple of times a year. It's done with the coach. But the practice comes up with the things they want to work on and they get overwhelmed, and so we just kind of keep it organized. We send it in their

follow-up notes with them. We pull it out occasionally, when appropriate, and kind of go over each one of those things. And again, it could be things they have, you know, known that they wanted to work on or it could be, aha! moments that came out of that assessment. And then there's lots and lots and lots of free tools online. So in the back of the presentation, you should have a copy of these hyperlinked resources. I hope many of you are familiar with several of them on there. I'm gonna show, for the sake of time, just two. One is going back to the AMA, right, "Steps Forward." So we're gonna go to the main area where you saw that practice assessment tool and on the right hand side, you have all these different topics. So let's say we know they need some help with time saving. So we would click that and you see, there's playbooks. I love the playbooks. They're thick, they're hyperlinks within. I'm not getting paid by AMA, by the way, but I pulled it out all the time with practices. I was in one the other day that, you know, we realized they're growing and they need to work a little bit on, the pre-visit planning, how they're doing that. You know, is it gonna be the day before with the next-day patients or first thing in the morning? And so we could click "previsit planning" and it's gonna load all these--the module. There's quizzes, you can do a power point for them. But also I want you to just notice one thing under "resources," look at all these free resources. Amazing. So take note of that and then the other one is just, you probably are familiar with, all right, the American College of Physicians. So check that out for time's sake. I won't click through that because getting back and forth. But hopefully, some of these things will help. So again, you've done that assessment, you've come up with a plan and then oftentimes it's like, what do I do? How do I help them? And I think especially for newer coaches or for me, like finances is not very comfortable, and so I know I can go to that ACP website and pull some resources. So then we're ready to get them in the process for change and change is hard and people resist it. And I think over my 12 years or so of doing this, these are a couple of takeaways that I have in general about it. One is what looks like resistance is often just a lack of clarity. They don't know what's going on. They need a little bit more detail, but maybe they're scared to ask. What looks like laziness is often exhaustion wearing multiple hats, so many practices right now. And what looks like a people problem is often just a situation or process problem. And that's what we're gonna talk about a little bit more ahead and we're really trying to help those leaders in the practice to focus on the situation and not the person. So one tool I think when we're looking at change that we should just be aware of, some of you may have heard of this, is the waterline method. And it just helps to understand breakdown in communication and it can be used in an organization to kind of pinpoint what's going on. And usually when there's a problem, we want to confront it, question point, our finger, right. But the water line is pretty simple. It just says as a group we're moving collectively, usually we take the job, we agree to the project, we're moving in the right direction, we're all on the same page. But, you know, life is not that easy, right? Inevitably, things happen, there's breakdowns and so it could be short staff, it could be a process change and new EHR implementation. So you're no longer working real smoothly towards that goal, you're kind of stuck in the mud if you will say. So the water line helps you identify the key areas that it could be, which is: the structure? Is there something going on within the structure as a whole? Is it a process issue or bad patterns? I've done what I've always done, I'm gonna get what I always got. Or is it interpersonal between two people or intrapersonal? So as

facilitators, I think we can help them to delve deep into this and figure out what's going on so they can get back to focusing on paper. So to apply the water line method, it's pretty much three basic things. One, the vast majority of team and organizational strife is due to lack of alignment of roles, unclear what's going on or who to turn to or maybe it's a communication issue. And so the tricky part is it shows up as conflict or we perceive it as conflict, but it's really just an issue within the structure or the process. So you wanna start at the surface whenever the team is facing, facing the challenge, just make sure they're clear about roles and responsibilities who they go to. Are there clear workflows? I mean, so many times it's like "this side is doing this and this side is doing that." And so maybe if they have to move somebody's out, that change is hard because it's not standardized. So the basics that we...it seems so basic, but we often take it for granted and then finally, just focusing on learning. So helping the provider or the practice manager to kind of shift that possibly there's a training that needs to happen, there's a competency maybe missing or maybe it is a workflow issue, it's not a person problem always. But if it is, that's when, then, you know, I think rounding is really important and we can encourage leader rounding to go and see if there are interpersonal, problems going on, because what happens at home, we do carry it to work sometime, right? So take a look a little bit further at the water line, that's just the basis of it. And so sometimes, you know, when we're looking from where we started at, at an assessment, and we move forward to helping them break down areas for improvement, we've given them tools, we're really in there. It sometimes feels like we are the glue. I've had a lot of coaches that work for me, you know, feel that way, especially in the beginning, they feel their job is to do it for them. If they're not there, it can't be done. And I think that's natural to sometimes feel like that. But as we progress in our career, we wanna shift right, more into that doing, to empowering and that's what that graphic is here. And, and think about yourself right now, where are you on that continuum? And sometimes it just is finding the person within the organization who can be the glue. So many times, the practice manager, the physician, the owner, all the burden goes on them. But people want additional opportunities sometime and to be given. So if we as coaches can simply empower them to do that, I think that's an opportunity. A great book you may want to look at is "Executive Coaching with Backbone and Heart" written by Mary Beth O'Neill. And in the middle of it, she talks about the rescue model versus the responsibility model as coaches. So again, looking at where am I in this: when the practice brings something to me or we recognize an area that needs to be improved, am I rescuing them, you know, or am I more empowering them and putting the responsibility on them? And it's hard because I know practice to practice and project to project that can vary. But I think it's internally reflective, that we, we have to have that internal reflection as coaches and kind of see where are we and how do we help move them along because they've got to live with the decisions day in and day out, right? You know, we can go in and tell them, but, they've got, it's gotta be with them. So, in closing, I just think that one of the greatest things that we can do as facilitators is go in and help them assess what's going on. We can do this informally. We can do it formally with tools. You have some in your tool kit. Also in there is the process of mapping change. I think some new coaches say, "ok, how do I help map the change or the workflow?" So I've included a tool in there that might can help you. And then really making sure there's standard processes and a plan and then you implement the change

and then, "ok, are we done?" You know, I think about we call it "Heart Health Now," but the that was one of the projects AHRQ did on unhealthy alcohol use, when it's over, I don't want to walk away and think they're just gonna sustain it on their own. I think we've got to go in there and continue that support. And that's why I like that "now, near, far" chart. You can also add wins over there to the side, so that they are constantly in that celebration mindset because even if it's as simple as a PHQ or you know, an assessment, you never were doing, a virtual element that you were doing through the EHR or maybe each department was standardizing: that's a win, whatever it is. So helping to celebrate those wins and sustain. And one of my big things is just to help them to go from surviving, to thriving. If we do that, that, that feels just powerful, right? So hopefully you walked away with a little bit more to add in your tool kit than you did today. And I have extra copies if anybody needs anything and again, feel free to reach out if you need any additional tools, go get them. I wish you all the best. Thank you.