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## Patient Centered Medical Homes

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## Presentation Overview

1. Medical home basics
2. What do you need to know?
3. What does it take?
4. Where do you start?

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## Patient-Centered Primary Care Collaborative (PCPCC)

- *"A model or philosophy of primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety. It has become a widely accepted model for how primary care should be organized and delivered throughout the health care system, and is a philosophy of health care delivery that **encourages providers and care teams to meet patients where they are, from the most simple to the most complex conditions. It is a place where patients are treated with respect, dignity, and compassion, and enable strong and trusting relationships with providers and staff.** Above all, the medical home is not a final destination instead, it is a model for achieving primary care excellence so that care is received in the right place, at the right time, and in the manner that best suits a patient's needs."*

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**Based on the AHRQ definition, the PCPCC describes the medical home as an approach**

- Patient-centered
- Comprehensive
- Coordinated
- Accessible
- Committed to quality and safety

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**Potential Barriers**

- EMR Investments
- Resources for Staff Training
- Resistance to Change

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**Overcoming barriers**

- EMR Investments
  - Plan for those possible increases in the return on investments.
    - Efficiencies
    - Higher more accurate coding
    - Less need for transcription
    - Identifying patients who need to come in for appointments
- Resources for Staff Training
  - Facilitate learning
  - Join a learning collaborative
  - Develop a QI structure within your clinic

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## Overcoming Barriers Cont.

- Resistance to Change
  - Responsibility for creating a culture that both accepts change embraces change is with management and executives of the organization
  - Change must involve the people, not imposed on them
    - Understand Change management principals
    - Use John Kotters "Eight Steps to Successful Change"

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## Change Concepts

**Change concepts form the Safety Net Medical Home Initiative**

- Engaged Leadership
- QI Strategy
- Empanelment
- Continuous and Team-Based Healing Relationships
- Organized Evidenced-Based Care
- Patient-Centered Interactions
- Enhanced Access
- Care Coordination

<http://www.safetynetmedicalhome.org/change-concepts>

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