

Practice Facilitation



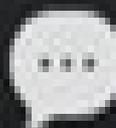
SKILLS WORKSHOP

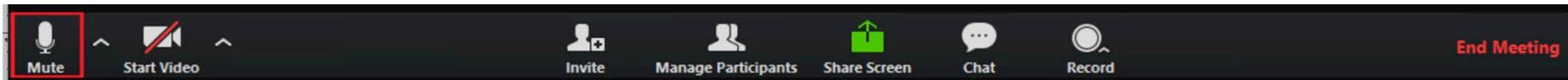
Influencing for Change

December 7th, 2017

Practice Transformation Initiative, a program of:

Tech Tips – Zoom Meetings

 Mute	 Start Video	 Chat	 Manage Participants
<p>MUTE / UNMUTE</p> <p>Click on the microphone icon.</p>	<p>VIDEO ON / OFF</p> <p>Click on the video camera icon.</p>	<p>CHAT</p> <p>Click on the chat icon to send questions and comments.</p>	<p>RAISE YOUR HAND</p> <p>Click on the 'Manage Participants' to contribute to the conversation.</p>



Link Your Phone Line with Web Log-In

- ***Does not apply*** to you if using audio through your computer or if you are just calling in, and not viewing slides.
- If you have called in using a phone line (such as a group of you listening together) and logged in online with your name, then you will need to link your phone login to your web login. This is done through a participant ID.

If you have already entered your participant number, you don't need to take any action.

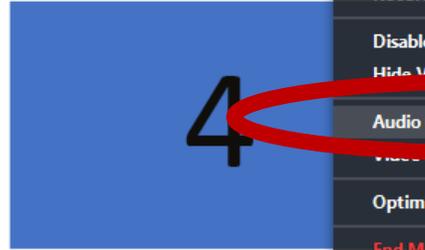
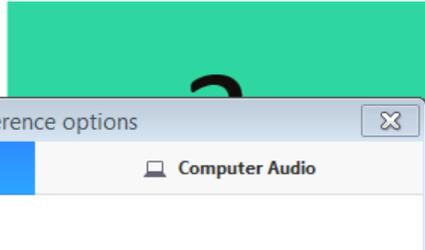
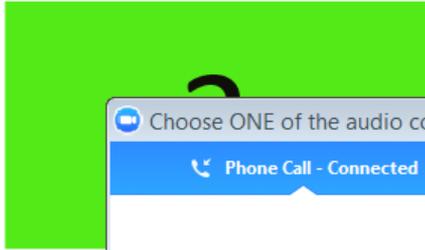
Click: Join Audio

Phone Call

Participant ID

BREAKOUTS

Mute Stop Video Manage Participants Polls New Share Pause Share Annotate More
ID: 564-744-548 Stop Share



Choose ONE of the audio conference options

Phone Call - Connected Computer Audio

Dial: +1 646 558 8656
+1 669 900 6833

Meeting ID: 564 744 548

Participant ID: 35

Done

Chat
Closed Caption
Breakout Rooms
Invite
Record on this Computer
Record to the Cloud
Disable participants annotation
Hide Video Panel
Audio Options...
Optimize Share for Full-screen Video
End Meeting

your breakout:
introduce yours

Designate 1 person to be the spokesperson for the group.

For your source of influence, discuss how to apply it to the case study to engage leadership and staff.

Return to the large group and report out.



Crystal
Eubanks



Hello and welcome!





POLL:

**What were you
successful at
transferring
into your work?**

ACHIEVING PHASE 3 MILESTONES

Implemented a change concept the practice felt would enhance what they are doing.

Better supported practices to move towards Phase 3.

Introduced the idea of sound business practices.

Collected existing tools throughout the organization.

Something else?
*Share in the chat
box.*



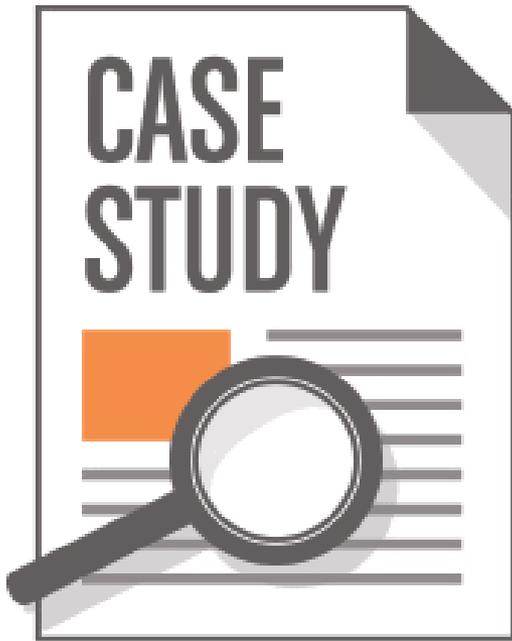
Upcoming Workshop Topics

December

Influencing for Change

- Review 6 sources of influence
- Brainstorm ideas for influencing using a case study

2018 Community of Practice Workshops



Virtual Workshops

- February 1
- April 5
- July 12
- October 4

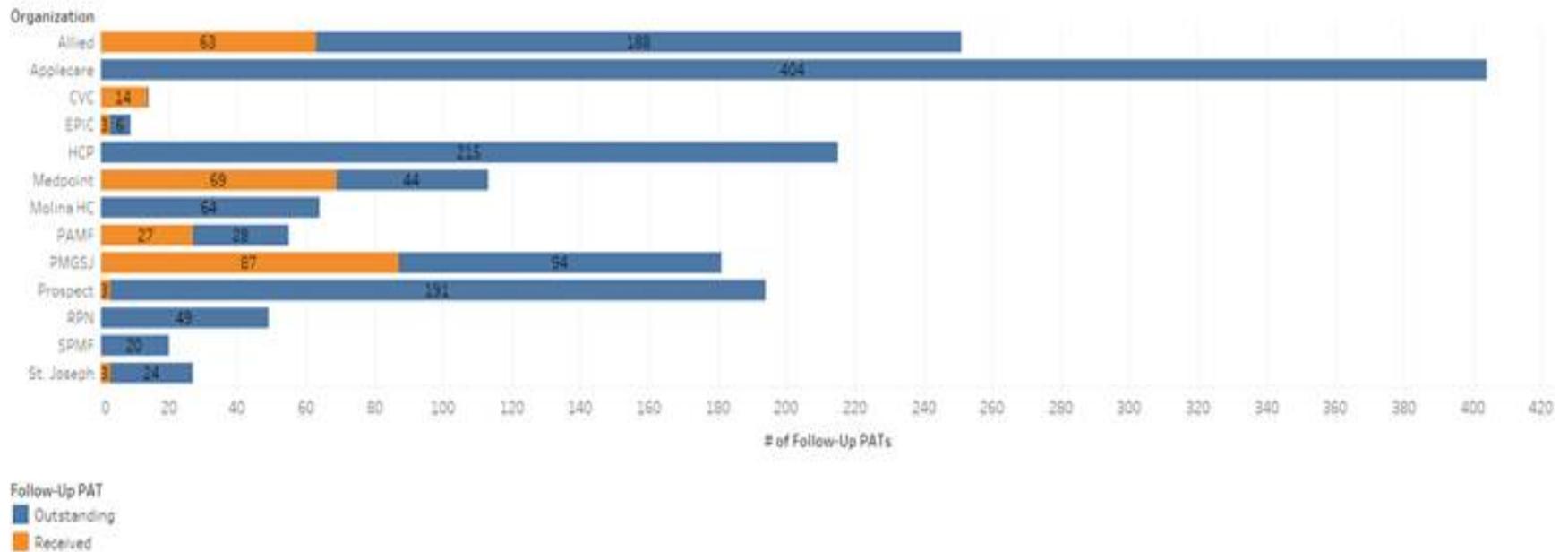
In-Person Workshops @ PTI Convenings

- February 21-22
- May 22-23
- August 28-29
- December 5-6



Submit PAT Follow-Ups by 12/22.

Follow-Up PATs Due Through 12/31/17



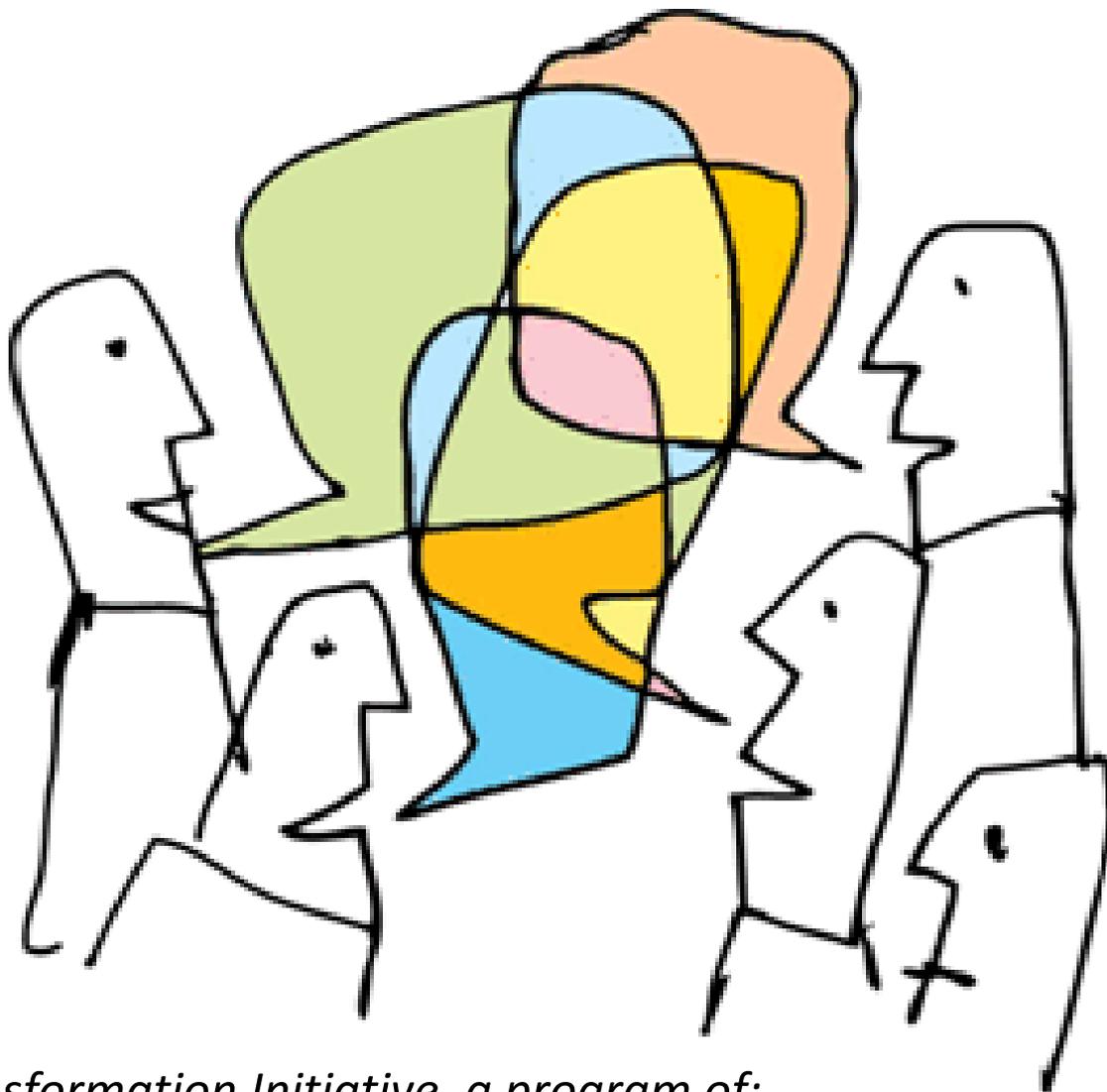


Today's Agenda

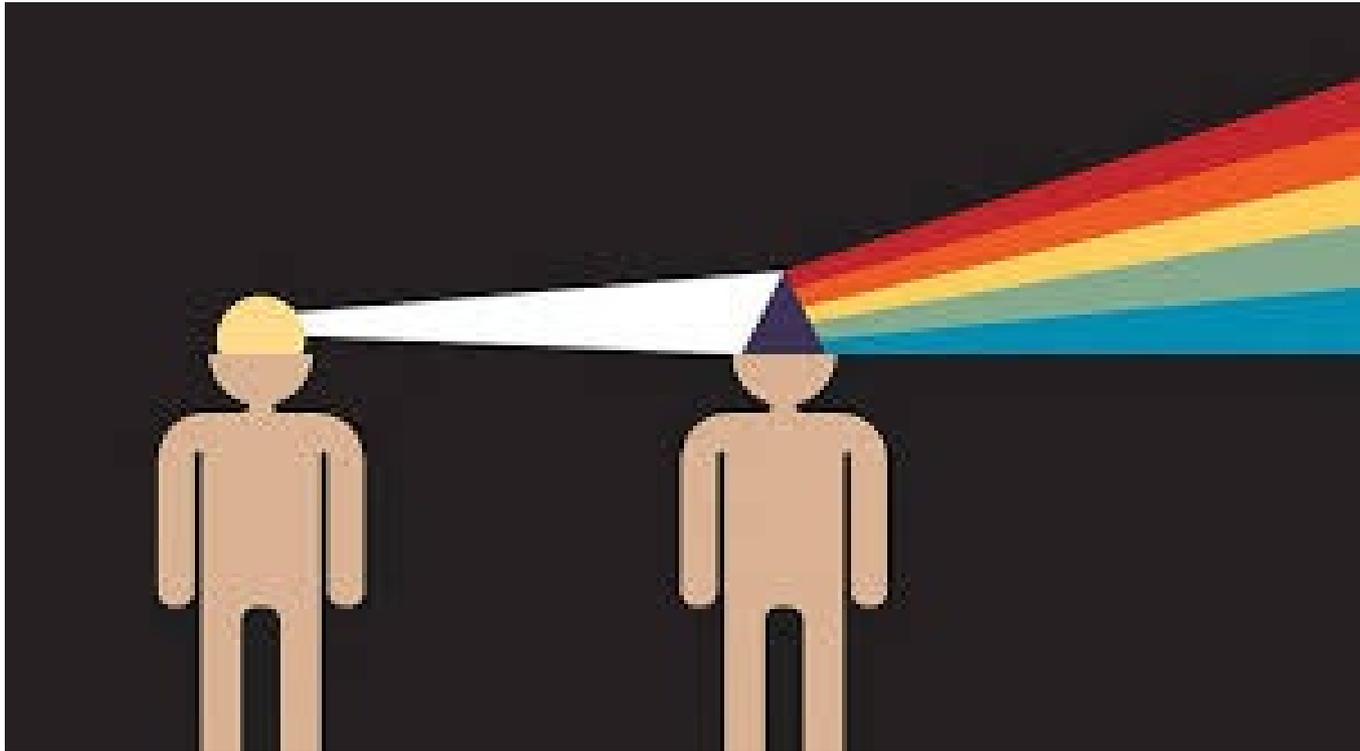
1. Touch base from previous workshop
2. Highlights from the 1st International Conference on Practice Facilitation
3. Review Six Sources of Influence
4. Apply sources of influence to engagement
5. Discussion & Wrap-up

International Conference on Practice Facilitation

- Who did you connect with?
- What were some key takeaways and learnings?
- What tips/tricks/tools will you take back into your work?
- How do you plan to apply your learnings with a specific practice?
- Anything else worth sharing? Any updates on the PF Certification?



Practice Transformation Initiative, a program of:



Influencing for Change

Practice Transformation Initiative, a program of:

12/5/2019



High-Performing PF Program 10 Key Elements



Six Sources of Influence

	MOTIVATION	ABILITY
PERSONAL	<p><i>Do they want to engage in the behavior?</i></p> <p>MAKE THE UNDERSIRBLE, DERISABLE</p>	<p><i>Do they have the right skills and strengths to do the right thing?</i></p> <p>HELPING THEM SURPASS THEIR LIMITS</p>
SOCIAL	<p><i>Are other people encouraging and/or discouraging behaviors</i></p> <p>HARNESS PEER PRESSURE</p>	<p><i>Do others provide the help, information, and resources required at particular times?</i></p> <p>FIND STRENGTH IN NUMBERS</p>
STRUCTURAL	<p><i>Are systems rewarding the right behavior and discouraging ineffective ones?</i></p> <p>DESIGN REWARDS AND DEMAND ACCOUNTABILITY</p>	<p><i>Are there systems that keep people in place and on progress?</i></p> <p>CHANGE THE ENVIRONMENT</p>





TOOL: Strategies for Applying Sources of Influence

<https://sloanreview.mit.edu/article/how-to-have-influence/>

Sources of Influence

Source 1 Personal Motivation: The questions savvy leaders ask themselves

- In a room by themselves would people *want* to engage in the behavior?
- Do they hate it or enjoy it?
- Do they find meaning in it?
- Does it fit into their sense of who they are or want to be?

Source 2 Personal Ability: The questions savvy leaders ask themselves

- Do they have the knowledge, skills and strength to be able to do the right thing?
- Can they handle the toughest challenges they will face?

Source 3 Social Motivation: The questions savvy leaders ask themselves

- Are other people encouraging the right behavior or discouraging the wrong behavior?
- Do people whom others respect model the right behaviors at the right time?
- Do people have good relationships with those who are trying to influence them positively?

Source 4 Social Ability: The questions savvy leaders ask themselves

- Do others provide the help, information and resources required — particularly at critical times?

Source 5 Structural Motivation: The questions savvy leaders ask themselves

- Are there rewards — pay, promotions, performance reviews or perks?
- Are there costs?
- Do rewards encourage the right behaviors and costs discourage the wrong ones?

Source 6 Structural Ability: The questions savvy leaders ask themselves

- Does the environment (tools, facilities, information, reports, proximity to others, policies, work processes) enable good behavior or bad?
- Are there enough cues and reminders to help people stay on course?

Strategies Successful Leaders Employed

- Identified the aspects of the change that were boring, uncomfortable or painful and found ways to either eliminate them or make them more pleasant.
- Found ways to connect the need for change with people's core values — for example, had people meet with the individuals who would benefit from the change or who were experiencing problems due to a lack of change.
- Created a strong sense of mission and purpose about the need for change that touched people and motivated them to engage in the process.
- Took great pains to get people's personal buy-in to the changes rather than issuing them as mandates.
- Gave guided practice and immediate feedback until people were sure they could engage in the new behaviors in the toughest of circumstances.
- Designed learning experiences that helped people successfully manage any communication, emotional and interpersonal hurdles they would face in changing their behavior.
- Had everyone involved in the change participate in real-time drills or simulations that tested whether they could perform as required under challenging circumstances.
- Gained substantial support and involvement of enough opinion leaders from throughout the organization that the credibility of the effort was unquestioned. Enlisted these opinion leaders as role models, teachers and supporters of change.
- Had all members of management from front-line supervisors to the most senior managers go to great lengths to teach, model and coach people toward new behavior.
- Identified people who would be most concerned about the changes, and made sure they were involved early.
- Made it clear to everyone that these behavioral changes were something top management strongly supported and modeled.
- Used mentors or coaches to provide just-in-time assistance when people stumbled with the new behaviors.
- Identified the toughest obstacles to change and made sure people had others to support them whenever they faced these obstacles.
- Created "safe" ways for people to get help without feeling embarrassed or being put on the spot.
- Provided everyone with the authority, information and resources they would need to step up to new behaviors as easily as possible.
- Adjusted the formal rewards system to make sure people had incentives to adopt the new behaviors.
- Made sure people had "skin in the game" by tracking their use of the new behaviors and linking it to rewards and punishments they cared about.
- Used a "carrot and stick" approach to make sure people knew the organization was serious about demanding change.
- Made sure everyone understood that even the most senior managers would be held accountable if they failed to support these changes — there were no exceptions.
- Reorganized people's workplaces to remove obstacles and to make the change convenient and easy.
- Provided new software or hardware or other new resources to make the change simpler and more automatic.
- Changed existing systems to make it difficult to avoid making the changes needed.
- Used cues, regular communications and metrics to keep the need for change "top of mind" for everyone in the organization.
- Created potent ways of giving all levels of management feedback about how successfully or unsuccessfully they were leading change.



TEAM-BASED CARE: STANDING ORDERS

12/5/2019

Adopting Standing Orders

	Motivation	Ability
Personal	1 Make the Undesirable Desirable <ul style="list-style-type: none">• Example	2 Surpass Your Limits <ul style="list-style-type: none">• Example
Social	3 Harness Peer Pressure <ul style="list-style-type: none">• Example	4 Find Strength in Numbers <ul style="list-style-type: none">• Example
Structural	5 Design Rewards & Demand Accountability <ul style="list-style-type: none">• Example	6 Change the Environment <ul style="list-style-type: none">• Example

Adopting Standing Orders

	Motivation	Ability
Personal	<p>1 Make the Undesirable Desirable</p> <ul style="list-style-type: none"> • Appeal to values like being effective • Hear their concerns, fears, doubts • Mas can learn new skills and feel empowered to be more involved in care • Physicians can be relieved of some of the burden, maybe even go home on time and earn quality incentives! 	<p>2 Surpass Your Limits</p> <ul style="list-style-type: none"> • Design trainings for MAs in the skills needed to carry out standing orders. • Develop competencies and a process to review their skills to ensure competency and give feedback. • Provider regular refresher trainings, can even be video of an in-person training.
Social	<p>3 Harness Peer Pressure</p> <ul style="list-style-type: none"> • Show performance data from care teams or practices using standing orders. • Have clinician champion come speak to the practice. • Have members of the practice visit a practice with effective team-based care to see it in action and ask questions. • Identify it in organizational action plans and strategic documents. • Promote standing orders drafted and recommended by organizational leadership rather than having the practice create on their own. 	<p>4 Find Strength in Numbers</p> <ul style="list-style-type: none"> • As a coach, be their elbow support in the early PDSAs. • Identify a peer champion for both MAs and physicians that can be a role model and provide 1:1 support to peers. • Establish consistent care teams so that a physician and MA are always paired together. • Use peers to give feedback during competency checks.
Organizational	<p>5 Design Rewards & Demand Accountability</p> <ul style="list-style-type: none"> • Change P4P programs to share rewards with care team members that carry out standing orders tied to performance 	<p>6 Change the Environment</p> <ul style="list-style-type: none"> • Co-location: Move physicians and MAs next to each other. • Set up EHR care guidelines and templates for MAs.

	MOTIVATION	ABILITY
PERSONAL	<p><i>Do they want to engage in the behavior?</i></p> <p>MAKE THE UNDERSIRBLE, DERISABLE</p>	<p><i>Do they have the right skills and strengths to do the right thing?</i></p> <p>HELPING THEM SURPASS THEIR LIMITS</p>

Sources of Influence

Source 1 Personal Motivation: The questions savvy leaders ask themselves

- In a room by themselves would people *want* to engage in the behavior?
- Do they hate it or enjoy it?
- Do they find meaning in it?
- Does it fit into their sense of who they are or want to be?

Source 2 Personal Ability: The questions savvy leaders ask themselves

- Do they have the knowledge, skills and strength to be able to do the right thing?
- Can they handle the toughest challenges they will face?

Strategies Successful Leaders Employed

- Identified the aspects of the change that were boring, uncomfortable or painful and found ways to either eliminate them or make them more pleasant.
- Found ways to connect the need for change with people's core values — for example, had people meet with the individuals who would benefit from the change or who were experiencing problems due to a lack of change.
- Created a strong sense of mission and purpose about the need for change that touched people and motivated them to engage in the process.
- Took great pains to get people's personal buy-in to the changes rather than issuing them as mandates.
- Gave guided practice and immediate feedback until people were sure they could engage in the new behaviors in the toughest of circumstances.
- Designed learning experiences that helped people successfully manage any communication, emotional and interpersonal hurdles they would face in changing their behavior.
- Had everyone involved in the change participate in real-time drills or simulations that tested whether they could perform as required under challenging circumstances.

	MOTIVATION	ABILITY
SOCIAL	<i>Are other people encouraging and/or discouraging behaviors</i>	<i>Do others provide the help, information, and resources required at particular times?</i>
	HARNESS PEER PRESSURE	FIND STRENGTH IN NUMBERS

Source 3 Social Motivation: The questions savvy leaders ask themselves

- Are other people encouraging the right behavior or discouraging the wrong behavior?
- Do people whom others respect model the right behaviors at the right time?
- Do people have good relationships with those who are trying to influence them positively?

Source 4 Social Ability: The questions savvy leaders ask themselves

- Do others provide the help, information and resources required — particularly at critical times?

- Gained substantial support and involvement of enough opinion leaders from throughout the organization that the credibility of the effort was unquestioned. Enlisted these opinion leaders as role models, teachers and supporters of change.
- Had all members of management from front-line supervisors to the most senior managers go to great lengths to teach, model and coach people toward new behavior.
- Identified people who would be most concerned about the changes, and made sure they were involved early.
- Made it clear to everyone that these behavioral changes were something top management strongly supported and modeled.
- Used mentors or coaches to provide just-in-time assistance when people stumbled with the new behaviors.
- Identified the toughest obstacles to change and made sure people had others to support them whenever they faced these obstacles.
- Created “safe” ways for people to get help without feeling embarrassed or being put on the spot.
- Provided everyone with the authority, information and resources they would need to step up to new behaviors as easily as possible.

	MOTIVATION	ABILITY
STRUCTURAL	<i>Are systems rewarding the right behavior and discouraging ineffective ones?</i>	<i>Are there systems that keep people in place and on progress?</i>
	DESIGN REWARDS AND DEMAND ACCOUNTABILITY	CHANGE THE ENVIRONMENT

Source 5 Structural Motivation: The questions savvy leaders ask themselves

- Are there rewards — pay, promotions, performance reviews or perks?
- Are there costs?
- Do rewards encourage the right behaviors and costs discourage the wrong ones?

Source 6 Structural Ability: The questions savvy leaders ask themselves

- Does the environment (tools, facilities, information, reports, proximity to others, policies, work processes) enable good behavior or bad?
- Are there enough cues and reminders to help people stay on course?

- Adjusted the formal rewards system to make sure people had incentives to adopt the new behaviors.
- Made sure people had “skin in the game” by tracking their use of the new behaviors and linking it to rewards and punishments they cared about.
- Used a “carrot and stick” approach to make sure people knew the organization was serious about demanding change.
- Made sure everyone understood that even the most senior managers would be held accountable if they failed to support these changes — there were no exceptions.
- Reorganized people’s workplaces to remove obstacles and to make the change convenient and easy.
- Provided new software or hardware or other new resources to make the change simpler and more automatic.
- Changed existing systems to make it difficult to avoid making the changes needed.
- Used cues, regular communications and metrics to keep the need for change “top of mind” for everyone in the organization.
- Created potent ways of giving all levels of management feedback about how successfully or unsuccessfully they were leading change.



POLL:

Which of sources of influence do you struggle with the most?

Make the Undesirable the Desirable [Values]

Surpassing Your Limits [Skills & Knowledge]

Harness Peer Pressure [Teamwork]

Find Strength in Numbers [Team Support]

Design Rewards & Demand Accountability [Incentives]

Change the Environment [Structural]

PDSA #2 – Breakout Groups



Link Your Phone Line with Web Log-In

- ***Does not apply*** to you if using audio through your computer or if you are just calling in, and not viewing slides.
- If you have called in using a phone line (such as a group of you listening together) and logged in online with your name, then you will need to link your phone login to your web login. This is done through a participant ID.

If you have already entered your participant number, you don't need to take any action.

Click: Join Audio

Phone Call

Participant ID

CASE STUDY: ENGAGING UP & OUT

<https://pbgh.box.com/s/vfpm9n0b31chcor7p4ritkatu2bjp51j>



BACKGROUND:

- A Practice Facilitator (PF) has been assigned the task of engaging practices to participate in practice transformation. The CEO of the organization has requested that the PF start her PTI outreach with the practice Family Health, but there has been little communication from the organization's C-Suite regarding what is expected of providers and staff or the importance of practice transformation.
- She has done some homework and has learned the following about Family Health practice staff:

Physician

- At the practice for 6 years
- She blocks time on her schedule for administrative tasks/duties.
- Generally ends up using the blocked time to see patients, as appointment access is poor.

Nurse Practitioner

- At the practice for 3 months, filling a relatively new position.
- Her patient experience feedback is stellar and she is proficient regarding technology and use of the electronic health records.

Medical Assistant

- Hired last month and comes from a practice where team-based care was effectively functioning.
- She is accustomed to working at the top of her license and being accountable for population health management for a panel of assigned patients. However, Family Health is struggling with team-based care execution and the MA is already feeling a bit frustrated that her skills are underutilized.
- This position has been somewhat of a revolving door, as the pay is low and the practice location is difficult to get to.

Receptionist

- High-school graduate with no secondary education credentials. She is attending a local trade school to become an MA and would like to continue her education to obtain her nursing degree.
- She has mastered the EHR (can generate reports, understands referrals, and can assist providers/staff with technical issues) and is skilled at Excel and Word (self-taught).
- She has great interpersonal skills and patients react positively to her reminder and outreach calls.

Office Manager

- Shared by Family Health and another practice. At the organization for 8 years and is responsible for quality and compliance, as well as general clinic operations.
- She has had training in the Model for Improvement and has tried to implement some changes; however, at this point she has only engaged the receptionist, NP, and the former MA in attempting to address patient satisfaction and care experience.

Assignment

In your breakout group,
brainstorm and discuss...

**How might she apply one of the
Six Sources of Influence to better
engage the following people:**

- CEO of the organization and executive sponsor of practice transformation?
- Physician Lead of the practice?
- Practice staff?

Practice Transformation Initiative

Make the
Undesirable
Desirable
APRIL

Harness Peer
Pressure
ALEX

Design Rewards and
Demand
Accountability
JULIANE

Change the
Environment
CRYSTAL

BREAKOUTS

Make the
Undesirable
Desirable

APRIL

Harness Peer
Pressure

ALEX

Design Rewards and
Demand
Accountability

JULIANE

Change the
Environment

CRYSTAL

In your breakout:

1. Introduce yourselves.
2. Designate 1 person to be the spokesperson for the group.
3. For your source of influence, discuss how to apply it to the case study to engage leadership and staff.
4. Return to the large group and report out.

Practice Transformation Initiative



BREAKOUT GROUP SHARING

Make the
Undesirable
Desirable

APRIL

Harness Peer
Pressure

ALEX

Design Rewards and
Demand
Accountability

JULIANE

Change the
Environment

CRYSTAL

Practice Transformation Initiative, a program of:



CHAT:

What will you transfer into your work from this workshop today?

*Think about your October Convening follow-up to have a conversation between leadership and coaching team about how to strengthen your PF program.

Practice Transformation Initiative, a program of:



UPCOMING EVENTS

- December 13th: [Share & Learn Webinar](#) – 2018 Goals
- January 24th @ : [Share & Learn Webinar](#) - Data
- February 1st @ 10am: [Practice Facilitation Workshop](#)
- February 21-22 @ Irvine: [PTI Annual Convening](#)

2018 PTI Calendar



2018 Practice Transformation Initiative Events Calendar

Please hold the dates below for 2018 PTI in-person and virtual learning opportunities. See below for recommended attendees for each event. More details will be forthcoming for each event listed below. As the year progresses, keep an eye out for updated versions of the 2018 PTI Events Calendar, announced in our PTI Weekly Messages.

Event	Who Should Attend?	Date	Duration	Location	Registration Link	PO Partner
Share & Learn Webinar <i>Intro: Coordinated Care Delivery</i>	PTI Project Team Representative*	Wednesday, January 24 10:00 – 11:00 am	60 minutes	Virtual	https://pti-sl-jan18.eventbrite.com	Susan E Adams, HCP
Practice Facilitation Workshop <i>Case Study: Team Based Relationships, Coordinated Care Delivery</i>	Practice Facilitators Practice Facilitation Supervisors Project Managers	Thursday, February 1 10:00 – 11:00 am	60 minutes	Virtual	https://pti-pc-web-feb18.eventbrite.com	Cheryl Marks, Applecare Susan Le, HCP
PTI Annual Convening <i>Deep Dive: Coordinated Care Delivery, Team Based Care, Adaptive Leadership</i>	PTI Project Team**	Wednesday & Thursday February 21-22 Day 1: 8:00 am – 4:30 pm Day 2: 8:00 am – 12:00 pm	1.5 days	Southern CA	https://pti-feb-2018.eventbrite.com	Pooja Bhatt, PAMF Michelle Parry, HCP
Data Webinar	Data Manager or Data Representative	Wednesday, March 7 10:00 – 11:00 am	60 minutes	Virtual		NA
Share and Learn Webinar <i>Intro: Enhanced Access</i>	PTI Project Team Representative*	Wednesday, March 21 10:00 – 11:00 am	60 minutes	Virtual	https://pti-sl-mar18.eventbrite.com	Judy Coster, Medpoint
Practice Facilitation Basics Training	New Practice Facilitators (and those who want a refresher) Leaders/Managers interested in building & supporting a Practice Facilitation Program	Wednesday & Thursday March 28 -29 8:00 am – 4:30 pm (Both Days)	2 days	Northern CA	https://pti-pc-train-mar18.eventbrite.com	Cynthia Gomez, Ho Chau, & Nguyen Tu, PMGSJ Michelle Mora & Rocio Chavez, Molina
Practice Facilitation Workshop <i>Case Study: QI Strategy, Practice Facilitation Program Sustainability</i>	Practice Facilitators Practice Facilitation Supervisors Project Managers	Thursday, April 5 10:00 – 11:00 am	60 minutes	Virtual	https://pti-pc-web-apr18.eventbrite.com	Lasha Tennyson, HCP Cathy Martinez, HCP
Share and Learn Webinar <i>Intro: Organized Evidence Based Care</i>	PTI Project Team Representative*	Wednesday, April 18 10:00 – 11:00 am	60 minutes	Virtual	https://pti-sl-apr18.eventbrite.com	Judy Coster, Medpoint
PTI Quarterly Convening <i>Deep Dive: Enhanced Access, Organized Evidence Based Care, QI Strategy</i>	PTI Project Team**	Tuesday & Wednesday May 22 – 23 Day 1: 8:00 am – 4:30 pm Day 2: 8:00 am – 12:00 pm	1.5 days	Southern CA	https://pti-may-2018.eventbrite.com	Michelle Parry, HCP Susan Le, HCP LaTrenda Washington, HCP

2017 Practice Facilitation Skills Workshops

February 2

BUILDING
RELATIONSHIPS WITH
PRACTICES

March 2

MANAGING PRACTICE
FACILITATION WORK

April 13

CREATING QI PLANS

May 4

BUILDING CAPACITY &
MOTIVATTION FOR
CHANGE

June 1

ACHIEVING PHASE 2
MILESTONES

July 6

FACILITATING LEARNING
FOR TRANSFORMATION

August 3

ACCELERATING
IMPROVEMENT
TOWARDS TARGETS -
PART 1

September 7

STORYTELLING FOR
TRANSFORMATION

October 12

ACCELERATING
IMPROVEMENT
TOWARDS TARGETS -
PART 2

November 2

ACHIEVING PHASE 3
MILESTONES

December 7

INFLUENCING FOR
CHANGE

Practice Transformation Initiative

Stay Connected



NEWSLETTERS
PTI Weekly Email
CQC Newsletter



SOCIALCAST
Virtual Learning Community



BOX
Virtual Library



PTI DATA PORTAL

Practice Transformation Initiative, a program of:

Crystal Eubanks

Senior Manager - Practice Transformation

ceubanks@calquality.org

Jen Burstedt Correa

Project Manager

jburstedt@calquality.org

Practice Transformation Initiative, a program of:



POLL:

Please rate your agreement with this statement:
Today's webinar was a good use of my time.

(Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree)

Practice Transformation Initiative, a program of:

Help us improve our offerings!



Share your feedback here:

https://www.surveymonkey.com/r/PFSW_2017-12-07

Practice Transformation Initiative, a program of: