

Tools and Resources to Save You Time and Help Your Patients:

A Selection of PCMH Best Practices from Center for the Advancement of Primary Care

Mission Statement

Center for the Advancement of Primary Care (CAPC), which is jointly supported by UMass Memorial Health Care and the UMass Medical School, is dedicated to enhancing the work life of our primary care providers.

CAPC represents an important collaboration across the departments of family medicine, geriatrics, general internal medicine and general pediatrics. CAPC is committed to working with others across the clinical system and the Medical School in a more coordinated fashion to strengthen and enhance the valuable primary care network that already exists throughout the UMass Memorial system.

Introduction

CAPC Spread Survey Summary (May 2013)

- Brief 5-question survey emailed to the UMass Memorial Health Care Network of primary care providers to explore their interest in practice improvement best practices
- 89 out of 250 primary care providers responded (33% response rate)
- Some survey results are presented below

Comment from survey respondent:

"Idea-sharing is really important. It feels like it's currently lacking. I would definitely advocate to have more of it"

Q: When you are considering whether to implement a practice improvement intervention in your practice, how important are the following aspects?

Decision Criteria	Level of Importance*
Improves Clinical Quality	100
Ease of implementation	97
Improves efficiency/value	93
Improves patient experience	92
Improves quality of work life	83

*Indicates % who rated the item "Very important" or "Quite important"

Q: Please rate your level of interest in learning more about each best practice in the list below.*

*results abridged

Best Practice	Potential Customers ¹	Overall Perceived Value ²
Community resource info and referral protocols	48	69
Patient activation strategies	48	69
Standing orders	45	73
Eliciting pt feedback through surveys and focus groups	41	53
Diabetes treatment protocols/ workflows	41	64
Managing acute conditions without office visits	40	60

1. Respondents who selected "ready to start" or "very interested."

2. Respondents who selected "ready to start," "very interested" or "already implementing."

Resources Developed Summer 2013

HEALTH INSURANCE CASE MANAGEMENT PROGRAM LIST

RESOURCES FOR Mental Health/Substance Abuse COUNSELING AND MEDICATION MANAGEMENT

GENERAL INFORMATION AND RESOURCE WEBSITES

Community	Agency Name	Resource Type	Hours of Operation	Contact Information	Description/Comments
The Abuse Ctr	MassResources.org	Online	N/A	N/A	User-friendly online database for Massachusetts residents in need of basic community services
MassHealth	United Way National Information and Referral Website	Phone	N/A	Ph: 1(877)211-4277 Website: http://www.211.org	Free Massachusetts 2-1-1 helpline which provides confidential information and referral services for individuals who require assistance with food, housing, employment, health care, counseling, and more.
Special N	Massachusetts Child Care Resource and Referral Network Regional Resource Guides	Online	N/A	N/A	The North Central Massachusetts Family Resource Guide provides information for local preschool services, adult services, recreation opportunities, emergency support, government programs, housing, and health services for individuals, families, and providers.
Senior Ca	Direct Link to Current North Central Massachusetts Resource Guide for Families (Updated June 2010): http://massicareresourcesonline.org/2010/Content/leads/2010/11/north-central-ma-resource-guide.pdf	Online	N/A	N/A	Website supported by the Central Mass Agency on Aging that provides seniors and caregivers with information on aging, caregiving, and services for disabled seniors. The website can be searched using the menu bar or by pressing keywords in the search function.
Senior	Central MA Agency on Aging The SENIOR CONNECTION	Address: 500 High St, Box 110, Worcester, MA 01655 Phone: 1(508) 852-5538 Direct Link to Current "The Caregiver's Guide" (Updated 2007): http://www.seniorconnection.org/pdf/2007guide.pdf	Online	N/A	Persons may also call or go to the office for personalized help; the office is staffed daily with volunteers.

Health Insurance Case Management, Community and Mental Health Resource Lists and Referral Protocols

- Readily accessible lists make it easier to refer patients to case management services, community resources and mental health providers in a timely manner
- Easy and timely access to high-quality resources can improve your patients' quality of life
- Empowers patients to engage in self-care

Dear [REDACTED]
RE: [REDACTED]
INSURANCE COMPANY NUMBER
COMPANY NAME
COMPANY ADDRESS
COMPANY FAX NUMBER

To Whom It May Concern:

Mr. [REDACTED] is a [REDACTED] year old patient under my care at [REDACTED]. He has been diagnosed with [REDACTED] (ICD-9 [REDACTED])

This diagnosis represents a significant detriment to the patient's quality of life because the patient is denied [REDACTED] permanently, temporarily, or indefinitely.

This denial necessitates a manual wheelchair that is suitable for an individual weight [REDACTED] to end weight [REDACTED] for the duration of the patient's diagnosis.

If you have any questions or concerns, please contact me at [REDACTED].

Sincerely,

[PRACTICE NAME] [PRACTICE ADDRESS]

Letters of Medical Necessity

- Twelve boilerplate letters of medical necessity for frequently requested goods/services save time, include approval requirements, and allow modification for specific patient needs
- Available in low-tech (MS Word) or high-tech (Adobe) versions for easy completion by hand or electronically

Massachusetts Department of Public Health (MDPH) Immunization Program
Tetanus, Diphtheria and Acellular Pertussis (Tdap) Vaccine
The model standing order for Tdap vaccine is designed to be reviewed against the most current immunization recommendations and to be used in conjunction with the following information:
Standing Vaccination: Administer a single dose of Tdap to a single booster dose of Td to people in the following categories who have not previously received a dose of Tdap:
• Adults aged 18 years and older who have not previously received a dose of Tdap.
• Adults aged 18 years and older who have an unknown vaccination history.
• Adults aged 18 years and older who have an unknown vaccination history.
• Adults aged 18 years and older who have not previously received Tdap.
• Adults aged 18 years and older who have not previously received Tdap.
Trivalent Polysaccharide Vaccine (Tdap): Administer Tdap to pregnant women, preferably after 30 weeks gestation, and to adults who have not previously received a dose of Tdap.
Trivalent Polysaccharide Vaccine (Tdap): Administer Tdap to pregnant women, preferably after 30 weeks gestation, and to adults who have not previously received a dose of Tdap.
During Pertussis Outbreaks: Administer Tdap to everyone 11 years of age who has been exposed to pertussis and is at risk for transmission of pertussis. Administer Tdap to anyone 11 years of age or older who has been exposed to pertussis and is at risk for transmission of pertussis. Administer Tdap to anyone 11 years of age or older who has been exposed to pertussis and is at risk for transmission of pertussis.

Standing Orders for Immunizations

- Enhance reliability for providing evidence-based care
- Enhance efficiency for patients, staff, and PCPs
- Reduces PCP work and allows clinical staff members to work at the tops of their licenses
- Model standing orders are developed by the Massachusetts Department of Public Health

