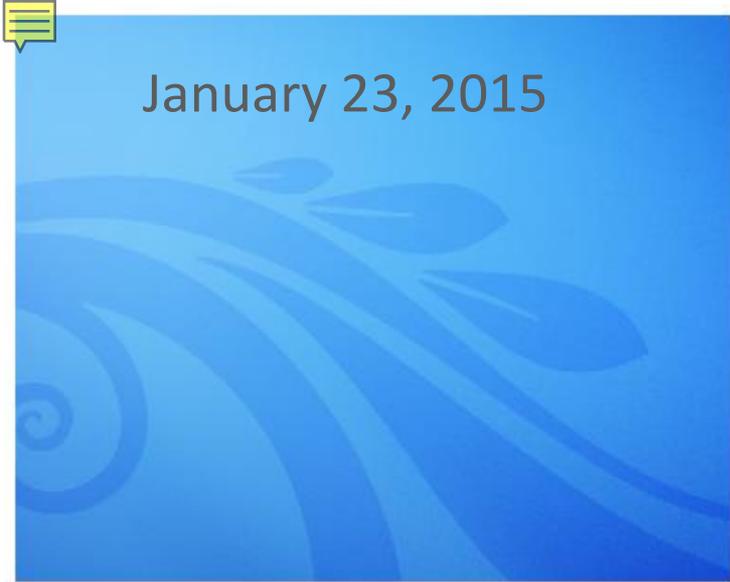




January 23, 2015



Steve Bromer, MD
Sarah Colvario, MS



Workforce Development Initiative

Technical Assistance for Practice Transformation



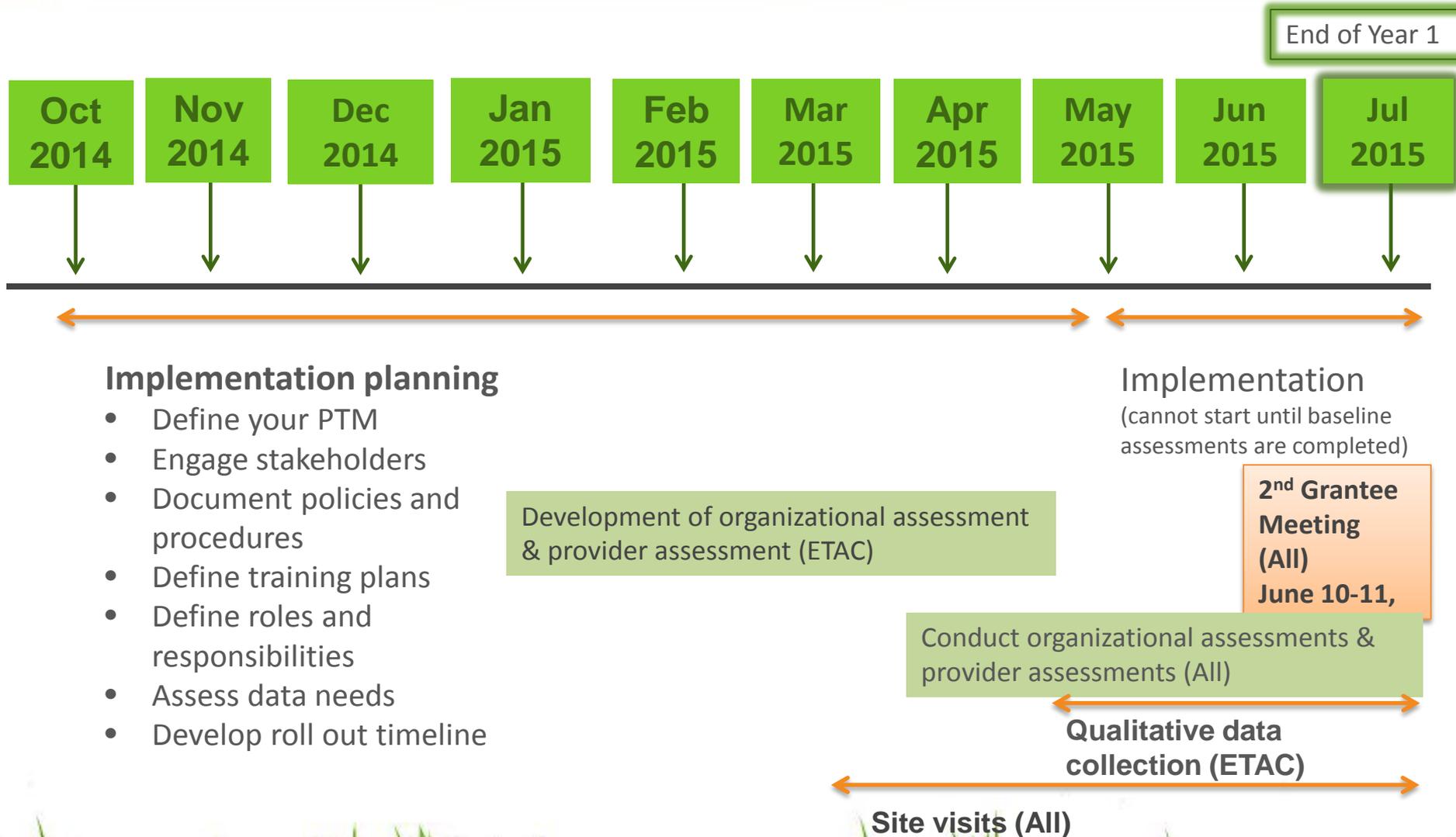


Housekeeping Roll Call Recording



Review from last webinar

Overview of Milestones & Target Dates



Year 1 of a typical SPNS project

Pre-implementation activities

- Define your practice transformation model
- Engage stakeholders
- Document policies and procedures
- Define training plans
- Define roles and responsibilities
- Assess data needs
- Develop roll out timeline



Resource Tool for Goals and Activities – Pre-Implementation Checklist

Year 1 Pre-Implementation Checklist

Define practice transformation model

- Determine the category or categories your PTM falls into
 1. Expanding workforce – training new primary care providers to provide HIV care
 2. Making workforce more efficient – changing roles and responsibilities of existing staff and/or hiring new staff; developing the care team
 3. Making patient engagement more efficient – e.g., patient navigation, linkage with CBOs, sending non-critical patients to primary care providers, self-management
- Identify goals – utilize PCMH-A, building blocks to help ID goals
- Identify providers, staff and clinics that will be impacted by PTM
- Identify services that will be impacted by PTM

Engaging stakeholders

- List stakeholders
 - o at all health facilities affected by PTM
 - o all intersection points of patient care
 - o all staff interacting with PTM
- Hold meetings with all impacted stakeholders to plan PTM
 - o Meetings will likely be held at various stages of pre-implementation as well as during implementation.

Defining roles and responsibilities

- Job descriptions
 - o Define job descriptions for new staff
 - o Document current roles and responsibilities
 - Esp. as they relate to the greater care team
 - o Define new roles and responsibilities for existing staff
- Outline co-management processes and procedures among care team members

Write down protocols, policies and procedures

- Know current clinical policies and procedures
 - o Understand current clinical work flow
 - Track patients as they move through the clinic
 - If you differentiate between patient populations, create workflow for each different type of patient.
 - o E.g. newly diagnosed, high acuity, homeless, primary care, newly reengaged
 - o Document current panels (if they exist)
- Define new clinical policies and procedures

- o Document future work flow
 - How will the PTM change the visit flow for patients?
 - If you are planning new services for particular patient populations, create workflow for each different type of patient.
 - E.g. newly diagnosed, high acuity, homeless, primary care, newly reengaged
- o Plan how to clean up panels (if they exist) **Do not implement new panelment until after baseline assessment.**
- o **Plan stable teams or teamlets Do not implement new teams until after baseline assessment if part of your PTM.**

Training

- Define competencies
 - o for new staff
 - o for providers
 - o for existing staff
- Define Learning objectives
 - o for new staff
 - o for providers
 - o for existing staff
- Develop and document training curricula modules
- Document trainings
 - o for new staff
 - o for providers
 - o for existing staff
- Develop evaluation tools to assess effectiveness of training over time
 - o For learning objectives
 - o For skills and competencies
- Develop training timeline

Assess data needs

- Electronic medical records
 - o Who has access?
 - o Can data be easily extracted?

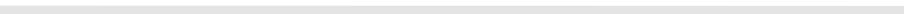
Roll out

- Develop a timeline
- Develop a revised work plan
- How will you sequence roll out? If multi-site, will you have pilot sites? Roll out to everyone at once? Roll out to smaller number of sites first?

TA for Practice Transformation



TA for Practice Transformation

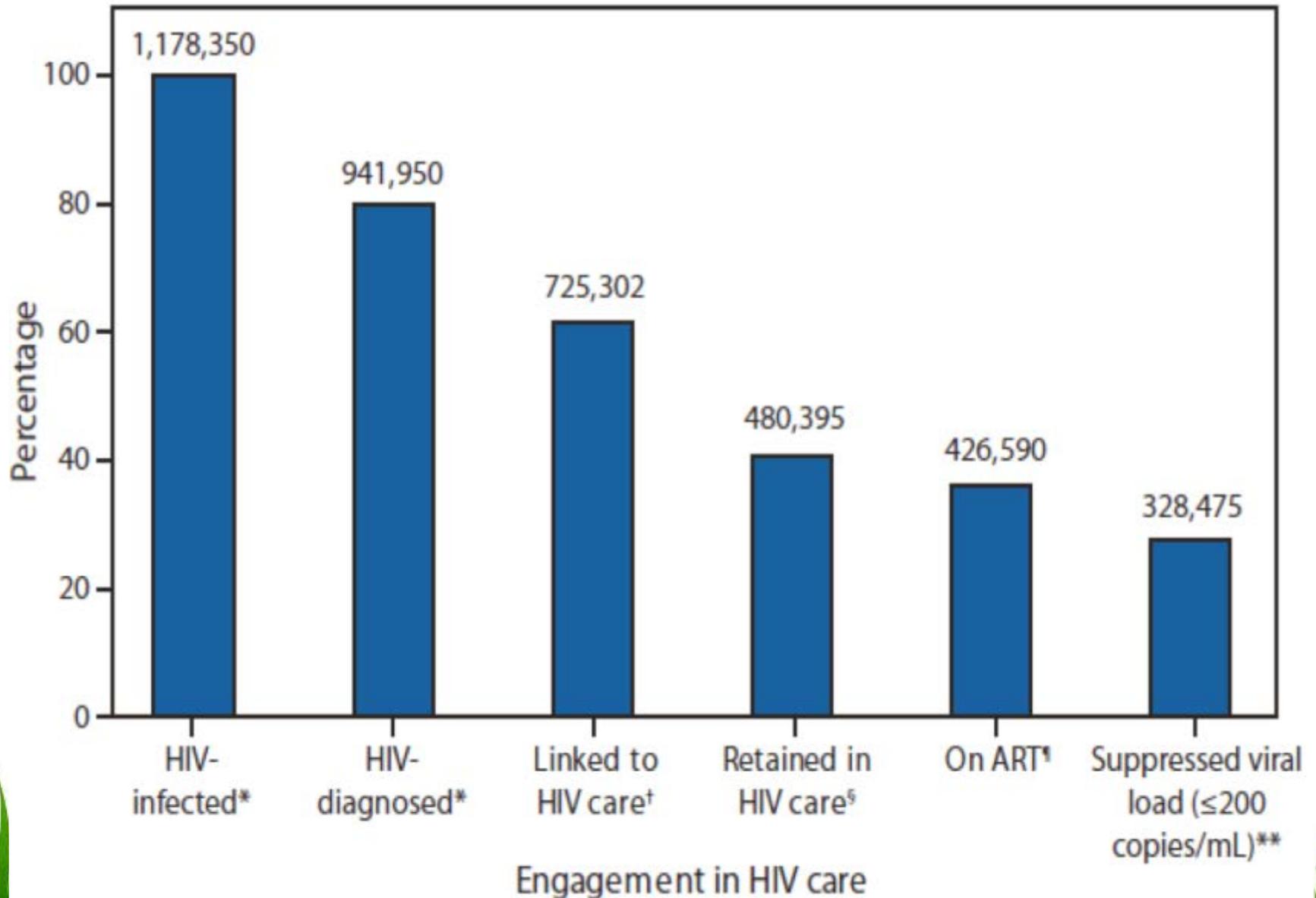


Resources for Practice Coaching



Why do we need a **practice coach** and
what is **practice coaching**?

HIV Care Continuum

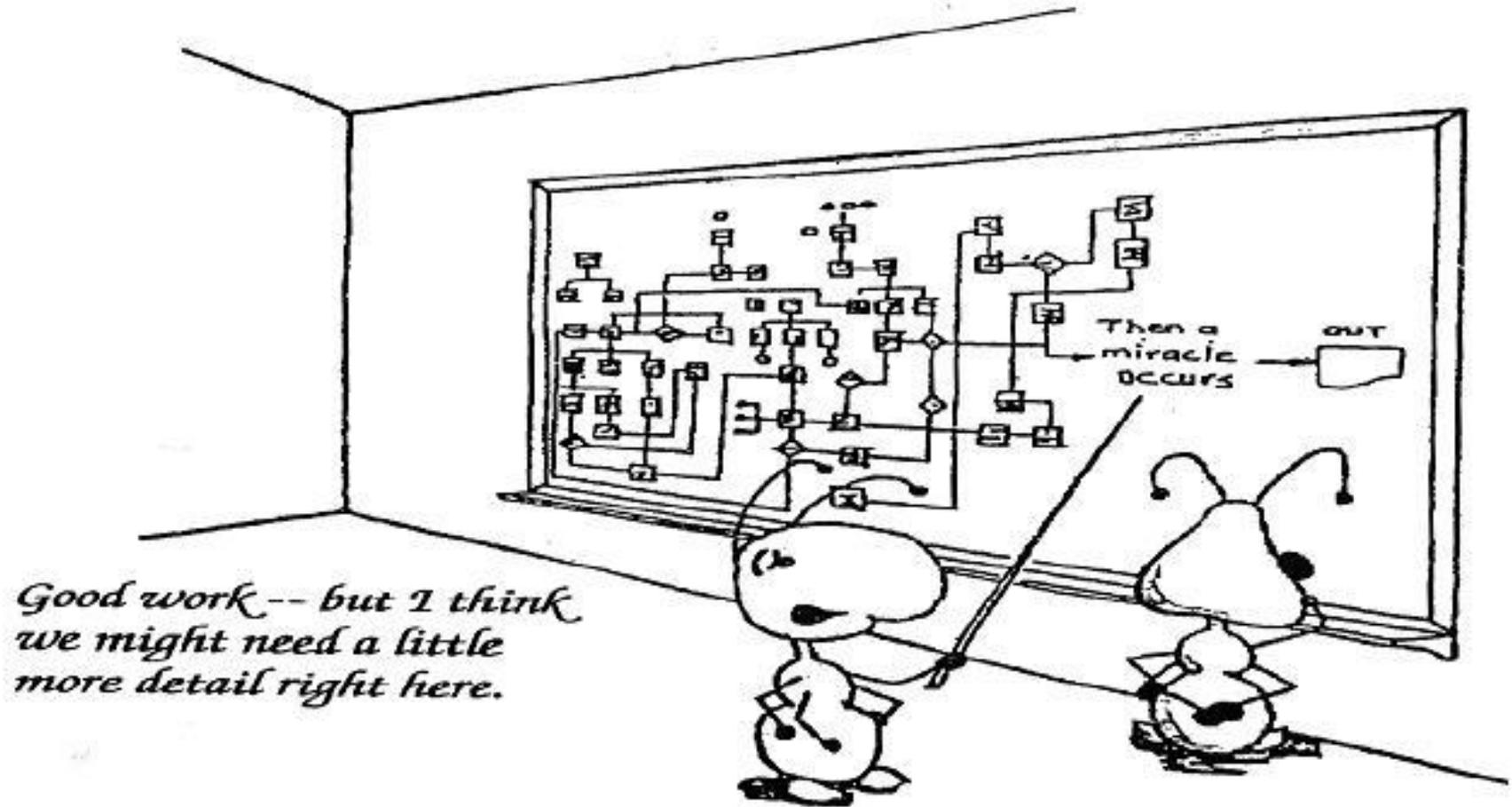


Transformation is HARD WORK

“The reason a lot of people do not recognize opportunity is because it usually goes around wearing overalls looking like hard work.”
– Thomas Edison



Practice Coach Role





What is a Practice Coach?

- Practice Coaches work with medical practices
 - to make **meaningful and sustainable changes** designed to **improve patients' outcomes**.
- Practice Coaches help care teams (clinical) and improvement teams (QI)
 - **develop the skills** they need **to apply proven-strategies** to their practice environment **to improve patient health and quality of care**



Practice Coaches help:

- Organize, prioritize and sequence QI and improvement activities
- Train staff to integrate performance data into practice
- Support a team orientation with effective communication skills



Please Share: Who on the call has worked with a Practice Coach?

- Please briefly share your experiences:
 - What role does/did this person serve?
 - What is/was helpful?
 - What is/was challenging?



Who is a practice coach?



- Can be internal or external to organization
 - Benefits and challenges to each model
- Range of skill sets:
 - Quality improvement
 - Organizational development
 - Project management
 - Practice transformation tools
- Can work on
 - Any element of
 - the Building Blocks
 - your Practice Transformative Model
 - Often will develop through PDSAs ways to improve clinical flow, clinical and other QI measures.

Steps during practice coaching



- Identify the scope of the practice coach's work
- Identify who from the clinic is on the practice transformation team
- Identify clinic goals
- Maintaining accountability and perspective
- Troubleshooting
- Sharing best practices/resources

Options for Practice Coaching

Internal
Practice
Coach

- Choose an **individual** to serve this role
- Train online, live or with ETAC

AETC
Practice
Coach

- AETC may not yet have capacity
- ETAC can help AETC develop capacity

External
Practice
Coach

- Primary Care Development Corporation <http://www.pcdc.org/>
- Health Team Works <http://www.healthteamworks.org/>
- LEAN Health Care Consultants
- QUALIS Health: <http://www.qualishealth.org/about-us/our-services/healthcare-consulting-patient-centered-medical-home>

What do you want a **practice coach**
to do for **you?**

Option: Practice Coach Helps with Pre-Implementation Checklist

Year 1 Pre-Implementation Checklist

Define practice transformation model

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Roll out

- Develop a timeline
- Develop a revised work plan
- How will you sequence roll out? If multi-site, will you have pilot sites? Roll out to everyone at once? Roll out to smaller number of sites first?

Option: Practice Coach Helps with Workplan

Project Goal: Hire and Train key staff						
Objectives:	Action Steps	Staff	Year I			
			Quarter			
			1	2	3	4
1.1 Identify and hire personnel for key program roles.	a. Identify and hire PTM staff: project director, evaluator, data manager, RN clinical care coordinator, outreach expert, peer educator	E./	X	X		
	b. Orient and provide baseline training session for all PTM staff	E.I./	X	X		
	c. Annual training for all PTM staff	E.I./		X		X

Updates to Workplan:

- Assessments completed that create changes in objectives/goals?
- Reality check: Are your goals all attainable?
- How does your timeline need to be amended?
- What steps are not included in your workplan that should be?

Carrying out Action Steps



Other Options for Practice Coach:

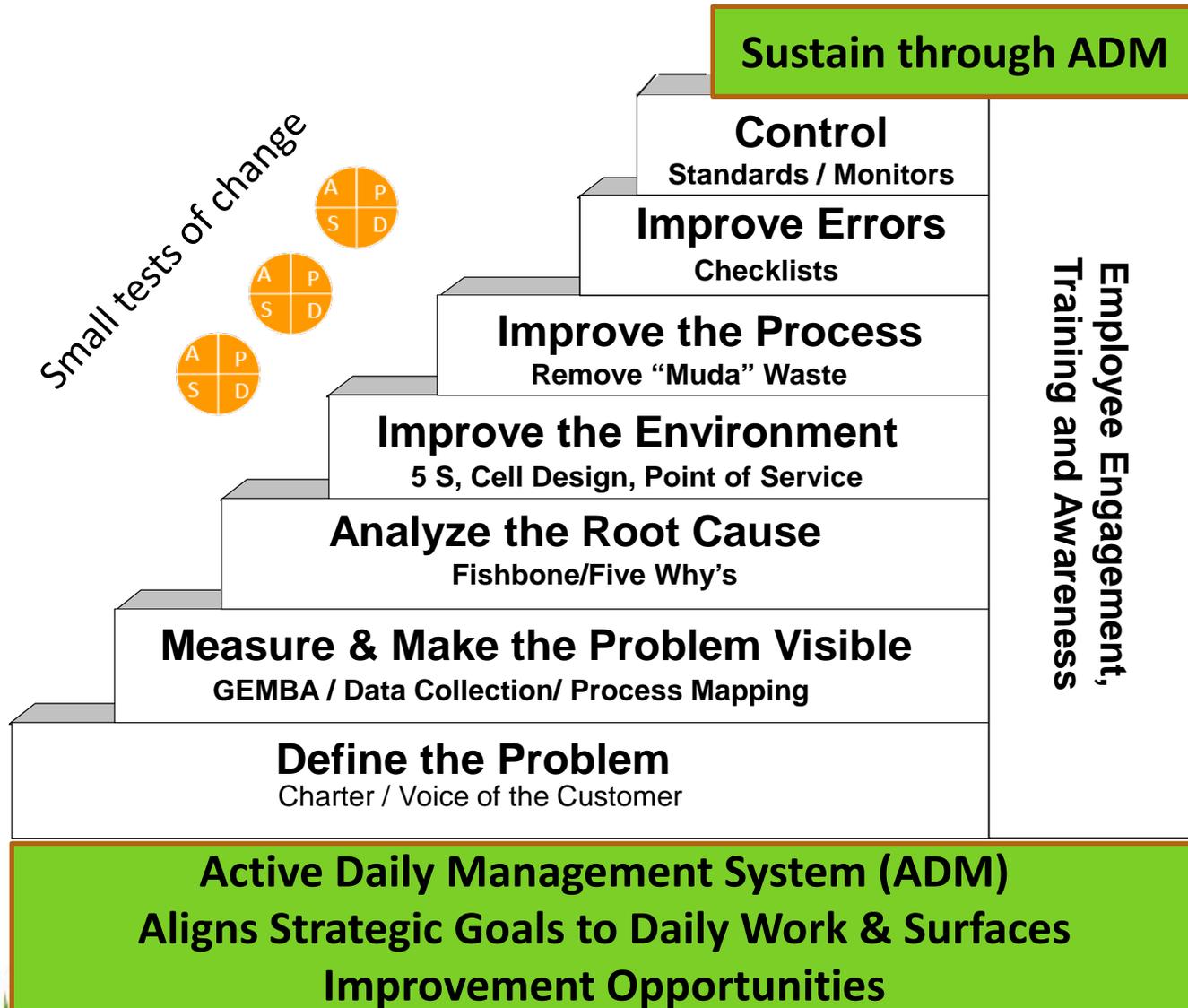
Examples:

- Assessments of clinic operations for improvement
- Trainings – planning for evaluation of post-training competencies (assisting with plan for active daily management)
- Assisting in development of trainings for standardization across sites...



How does a **practice coach** help
with **practice improvement**?

Lean/Six Sigma Improvement Project Pathway



PDSA – Plan, Do, Study, Act

PDSA Worksheet for Testing Change

Aim: (overall goal you wish to achieve)

Every goal will require multiple smaller tests of change

Describe your first (or next) test of change:	Person responsible	When to be done	Where to be done

Plan

List the tasks needed to set up this test of change	Person responsible	When to be done	Where to be done

Predict what will happen when the test is carried out	Measures to determine if prediction succeeds

Do

Describe what actually happened when you ran the test

Study

Describe the measured results and how they compared to the predictions

Act

Describe what modifications to the plan will be made for the next cycle from what you learned

Improvement Project Roadmap

1. Set an Aim – What are you trying to accomplish

2. Develop an Improvement Strategy.

3. Develop and Pilot a Reliable Standard Process of Care

4. Implement the Standard Care Process, Monitor Performance

5. Spread the New Standard Throughout the System

3. Develop and Pilot a Reliable Standard Process of Care

Tasks	Driver	Status 1: planned 2: in progress 3: complete	Next Steps
Get to know the current processes in detail: Use observation, process maps, value stream maps, run charts, surveys, Pareto analysis, etc.	Team Lead		
Sketch an initial process design	Team Lead/ Improvement Advisor		
Select which changes and improved design elements to test using PDSA cycles	Team Lead		
Test changes and refine the design by starting with 1 patient or event (testing and refining changes is an iterative, continuous process using PDSA cycles)	Team Lead		
Regularly analyze how the process and the changes are working and test additional changes as needed based on your analysis	Team Lead/ Improvement Advisor		
Track and document changes, tests, and results over time	Team Lead/ Improvement Advisor		
Coach and support front-line staff on problem identification, PDSA testing	Team Lead		
Provide regular feedback to process participants and the executive sponsor at least weekly	Team Lead		
When you are confident that the change is producing improvement, begin planning for implementation (making the change permanent)	Team Lead		

Resource Tool for Goals and Activities – Example from CEPC’s 10 BB Coaching Program



Building Block	Goal/Aim	SMART Objectives			
		Structure	Operational Process		Performance Measure
#4	<i>Workflows for clinical teams have been documented, are utilized to standardize practice, esp for Medication Reconciliation (Q15)</i>	<p>Conduct Trainings in Medication Reconciliation for the MEAs and RNs to develop skills by February 15, 2015</p> <p>Develop a workflow for medication reconciliation by February 15, 2015</p>	<p>The workflow for medication reconciliation is followed 80% of the time by MEAs and RNs by March 15, 2015 (measured by <u>spotcheck</u>).</p>		<p>Improvement in BBPCA Q15, from level D to level B</p>
			Baseline: 30%	Current: 50%	<p>Baseline: 9 overall, 1 for med</p> <p>Current: 4</p>





A3 - List Project Title Here

Department:

Team Members:

Situation/Goal

Background / Benefits

Assessment / Root Cause

Recommendations / Improvements / Countermeasures

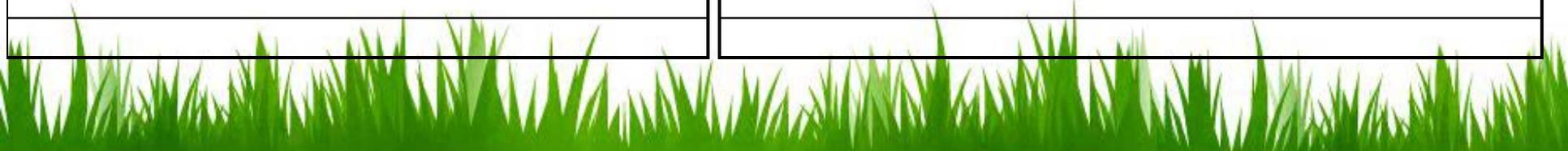
Plan / Do		

Key Activities / Who will be impacted	When (Date)	Resp

See (How will we know we were successful)		

Measure (Who/what/when/where/how)	Goal	Results

Adjust (Sustainability Plan)



Who is on your **Practice Transformation Team?**



Practice Transformation Team



Project Role	Name	Title at Medical Practice
Project Champion		(e.g. COO, CMO, CEO, etc.)
Overall Project Lead	Team “players” may change based on the objective you are working on	(e.g. Clinic Manager, Quality Improvement Manager)
Front Office Representative		(e.g. Eligibility Worker, Receptionist, Principal Clerk)
Back Office Representative		(e.g. Medical Assistant, LVN, RN)
Provider Representative		(usually MD, could be NP or PA depending on culture of clinic)
Other Representative(s) (optional)		(MSW, NP, PA, RN, Admin)
Who will oversee data collection and reporting?		



Practice Transformation Team

Please Share in this Poll:

Who is currently on your Practice Transformation Team for this initiative?



Practice Transformation Team

Please Share in this Poll:

**Who might you consider
adding to make your PTM
more effective?**



What are your practice transformation team's **goals**?

Resource Tool for Goals and Activities – developed by La Clinica

Place an "X" in the box that corresponds with the current status of Activity (1=Initial Stage 5=Completed)

Domain / Goal	Activities	1	2	3	4	5	Next Steps
Example: Integration of Community Health Workers into Care Team SMART GOAL: By June 1, 2015 (after baseline assessment administered by ETAC), we will have an established training as well as policies and procedures to integrate 2 CHWs into 2 (of 4) Care Teams.	1.) Documentation of current role and responsibility of CHW			x			
	2.) Documentation of future role and responsibility of CHW	x					
	3.) Identify process for developing role of CHW – focus groups? Qualitative interviews?	x					
	4.) Create training modules for training CHWs in (1) care team role, (2) HIV basics and (3) importance of engagement and retention of HIV+ patients in care. [can break these into more specific activities]	x					
	5.) Create post-training skills checks to be administered immediately, 1, 3, 6, 9 months post-training	x					
	6.) etc. etc. etc.						



Resource Tool – Goals and Activities

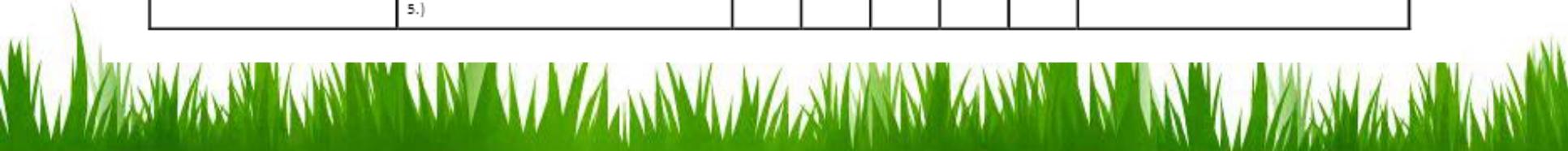
Your Clinic Name:

Your Transformation Team Members:

Domain	Definition
1.)	
2.)	
3.)	
4.)	
5.)	

Place an "X" in the box that corresponds with the current status of Activity (1=Initial Stage 5=Completed)

Goal	Activities	1	2	3	4	5	Next Steps
1.)							
	1.)						
	2.)						
	3.)						
	4.)						
2.)	5.)						
	1.)						
	2.)						
	3.)						
	4.)						
	5.)						



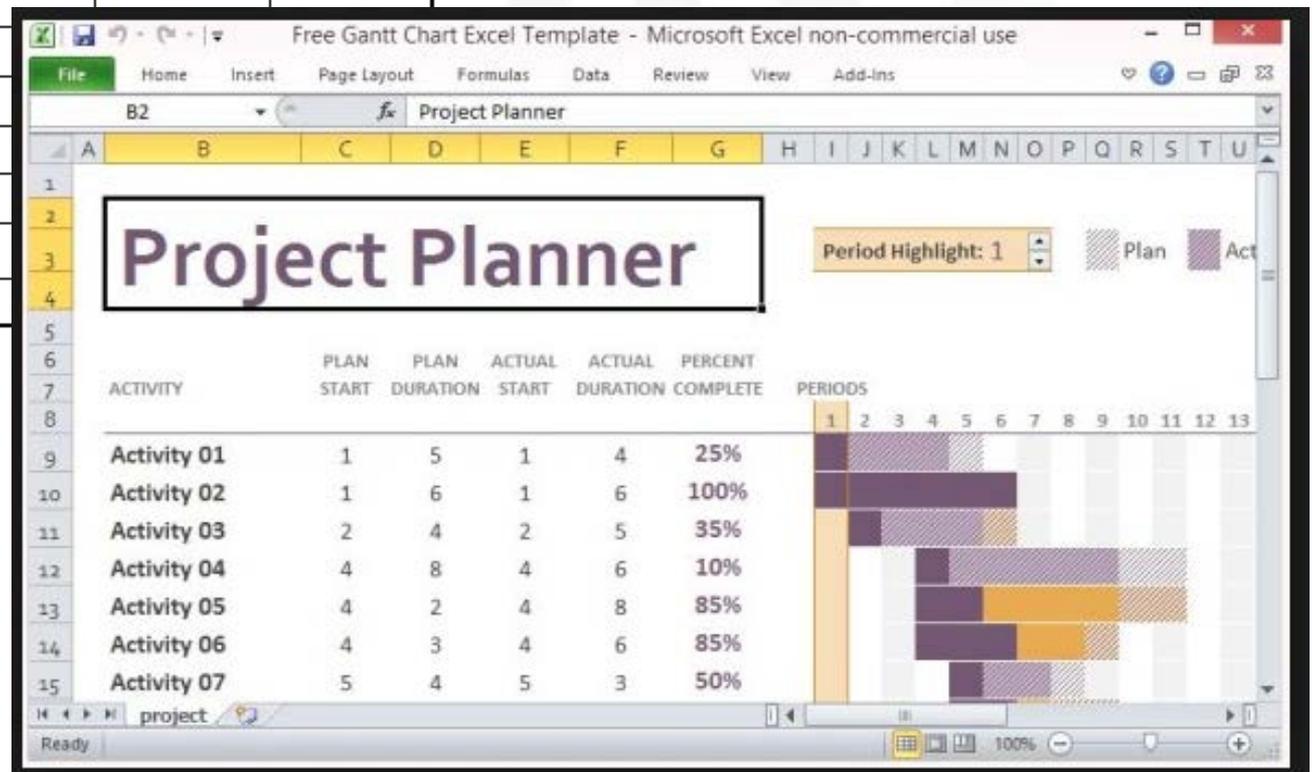
Accountability – Who will...

...hold your practice coach accountable?

...hold your practice transformation team accountable?

Accountability / Staying on Task

Plan / Do		
Key Activities / Who will be impacted	When (Date)	Resp



Accountability / Staying on Task

IV. Action Steps **This Meeting (3/26/14)** (5 minutes)

Action	Who's responsible?	By when?

V. Action Steps **Last Meeting (3/12/14)**

Action	Who's responsible?	By when?
Meet re: Evaluation of scribing	Sarah, Cathy and Amy	3/26
"Run Morning Huddle" Function	Cathy to ask Keith Sarah to ask Laurie	3/26
Present Telephone Triage and PDSAs at next all-staff meeting	10 BB Team	April 2
Identify time to "Study" new "Plan"	10 BB Team	All discuss 3/26
Think about and identify next quarter objectives: some thoughts so far – scribing pilot, PDSA on phone calls, training and PDSA on Panel Management, others?	10 BB Team	All discuss 3/26

Next Building Block Meeting: April 9th, 2:30-3:30pm (Sarah to come to Staff Mtng April 2, 1:15-3)



What are **resources** for **practice coaching**?

Practice Transformation - Resources

- **AHRQ – Agency for Healthcare Research and Quality**
<http://www.ahrq.gov>
- **PCMH Resource Center** www.pcmh.ahrq.gov
 - Practice facilitation is an evidence-based strategy to assist practice change and QI
- **Developing and Running a Primary Care Practice Facilitation Program: A How-To Guide (2011)**
<http://pcmh.ahrq.gov/page/tools-resources>
- **The Practice Facilitation Handbook (2013)**
<http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/pfhandbook/index.html>

Options for Practice Coaching

Internal
Practice
Coach

- Choose an **individual** to serve this role
- Train online, live or with ETAC

AETC
Practice
Coach

- AETC may not yet have capacity
- ETAC can help AETC develop capacity

External
Practice
Coach

- Primary Care Development Corporation <http://www.pcdc.org/>
- Health Team Works <http://www.healthteamworks.org/>
- LEAN Health Care Consultants
- QUALIS Health: <http://www.qualishealth.org/about-us/our-services/healthcare-consulting-patient-centered-medical-home>

Training your staff in Practice Coaching

Center for
Excellence in
Primary Care and
CareOregon's
Practice Coaching
for Primary Care
Transformation

<http://cepc.ucsf.edu/practice-coaching>

HealthTeam
Works Coach
University

<http://www.healthteamworks.org/coach-training/CUprogramincludes.html>

National Quality
Center's Training
on Coaching
Basics

<http://nationalqualitycenter.org/index.cfm/5847/37251>

Institute of
Healthcare
Improvement
(IHI)

Millard Filmore
College's
Certification

http://www.millardfillmorecollege.com/cstudio/class/pfc_901

LEAN Health Care
Training (various)

These are also
opportunities
to learn more
about practice
transformation!

Institute of Healthcare Improvement

www.ihl.org



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How to Improve

IHI uses the Model for Improvement as the framework to guide improvement work. The Model for Improvement,* developed by [Associates in Process Improvement](#), is a simple, yet powerful tool for accelerating improvement. This model is not meant to replace change models that organizations may already be using, but rather to accelerate improvement.

Learn about the fundamentals of the Model for Improvement and testing changes on a small scale using Plan-Do-Study-Act (PDSA) cycles.

- [Introduction](#)
- [Forming the Team](#)
- [Setting Aims](#)
- [Establishing Measures](#)
- [Selecting Changes](#)
- [Testing Changes](#)



HOW TO IMPROVE

[Introduction](#)

[Forming the Team](#)

[Setting Aims](#)

[Establishing Measures](#)

[Selecting Changes](#)

[Testing Changes](#)

[Implementing Changes](#)

[Spreading Changes](#)

FEATURED CONTENT

[Plan-Do-Study-Act \(PDSA\) Worksheet](#) »

[Project Planning Form](#) »

FREE VIDEOS

Learn more about the fundamentals of

IHI's Open School

<http://www.ihl.org/education/IHIOpenSchool/resources/Pages/BobLloydWhiteboard.aspx>



The Model for Improvement (Part 1)
Watch the video on IHI.org
Watch the video on YouTube
Read the transcript



The Model for Improvement (Part 2)
Watch the video on IHI.org
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PDSA Cycles (Part 1)
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PDSA Cycles (Part 2)
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Run Charts (Part 1)
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Run Charts (Part 2)
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Driver Diagrams
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Static Vs. Dynamic Data
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Flowcharts (Part 1)
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Flowcharts (Part 2)
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Control Charts (Part 1)
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Control Charts (Part 2)
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Family of Measures
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Cause & Effect Diagrams
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Divergent & Convergent Thinking (Part 1)
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Divergent & Convergent Thinking (Part 2)
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Read the transcript

Questions?



AETC AND OTHER RESOURCES FOR STAFF TRAINING

Resources for Training and Staff Development



Strategies for best use of Training Resources

- Identify training needs
- Align training topics with goals of PTM
- Identify goals and learning objectives
- Checklist of core competencies for roles and functions
- Strategize role of on-site versus self-study resources

Identify appropriate trainings

Roles

- Medical Providers
- Case Managers
- Patient Navigators
- Panel Manager

Functions:

- Practice Coach
- Self-Management



Trainings for Medical Providers

for PCPs – MDs, NPs, PAs

- **Foundation**
 - CME courses/webinars/Grand Rounds
 - AETC mini residency
 - Self-study/asynchronous web based resources
- **Clinical learning**
 - Consultation (onsite, Warmline, other resources)
 - Mentorship
- **Community of Practice**
 - Ongoing opportunity to learn from other providers

Trainings in Self-Management

for Care Team Staff - Navigators, CHWs,

- Positive Self-Management Training (PSMP) developed at Stanford, delivered all over patienteducation.stanford.edu/programs/psmp.html
- SAMHSA WHAM <http://www.integration.samhsa.gov/health-wellness/wham/wham-training>
- Health Coach Training by Center for Excellence in Primary Care (to be amended for PLWHA) <http://cepc.ucsf.edu/health-coaching-0>



Trainings in Panel Management

for Care Team Staff*

- Panel Management Training by CEPC <http://cepc.ucsf.edu/panel-management-0>
- Facilitating Panel Management - Module 20 in AHRQ's Practice Facilitation Handbook <http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/pfhandbook/mod20.htm>
- IHI: Population Management Executive Development Program (*focus on leadership) <http://www.ihl.org/education/InPersonTraining/PopulationHealthManagement/2015MarchPopulationManagement/Pages/default.aspx>
- EHR System training to better utilize functionality

Questions?

TA for Practice Transformation



TA for Practice Transformation



Utilizing the ETAC's Technical Assistance



Site Monitoring Monthly Calls

- Regular contact with the ETAC Site Liaison and HRSA PO: an opportunity to *share milestones in the development of your demonstration project.*
- Opportunity to acknowledge *barriers and areas needing additional TA*
- ETAC can help *identify appropriate resources* for addressing barriers



Practice Coaching TA

- ETAC can provide TA to internal Practice Coach
- ETAC can work with your AETC to develop Practice Coaching capacity
- ETAC not currently resourced to serve as your Practice Coach



Technical Assistance

- Steve Bromer and Sarah Colvario are affiliated with the Center for Excellence in Primary Care (CEPC) at UCSF.
- CEPC provides practice coaching
- CEPC provides trainings in:
 - Practice Coaching
 - Health Coaching (self-management)
- CEPC researches and develops best practices in primary care delivery

The UCSF Center for Excellence in Primary Care

CEPC identifies, develops, tests, and disseminates promising innovations in primary care to . . .

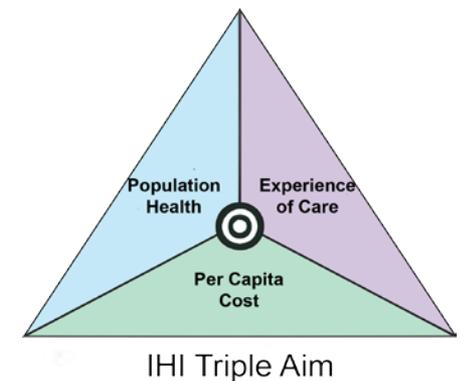
- improve the patient experience,
- enhance population health and health equity,
- reduce the cost of care, and
- restore joy and satisfaction in the practice of primary care

From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider Ann Fam Med November/December 2014 vol. 12 no. 6 573-576 – Tom Bodenheimer and Chris Sinsky



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[Resources and articles at cepc.ucsf.edu](http://cepc.ucsf.edu)



Technical Assistance

- Steve's areas of expertise:
 - HIV Providers within Primary Care Settings, Community Health Centers
 - Clinic transformation, Quality Improvement, Patient Self Management,
 - Pacific AETC Clinical Director
 - Former Medical Director for Practice Facilitation, Medical Homes Resource Center



Technical Assistance

- Sarah's areas of expertise:
 - Currently a Practice Coach with SF Safety-Net Clinics under the tutelage of Tom Bodenheimer, and a Trainer in Health Coaching (self-management) and Practice Coaching
 - Previously a Medical Assistant and Research Associate in HIV clinical settings, Community Health Educator in HIV/Sexual Health, HIV Counselor, and Social Worker.



Technical Assistance

- Steve and Sarah worked on the HIV-Medical Homes Resource Center project, helping HIV Clinics understand the steps of NCQA recognition and/or practice transformation.
- <https://careacttarget.org/mhrc>



Technical Assistance

- Steve and Sarah are tasked with TA for this project
- However, the entire ETAC team at UCSF has a wealth of knowledge in HIV research, practice, evaluation.



TA for Practice Transformation



Practice Coaching

Please Share in this Poll:

**What is your current
thinking/plan for including a
practice coach to help with your
PTM?**



Questions?

