

# A Process Map & Gap Analysis Exemplar to Guide PCMH Redesign Support & QI

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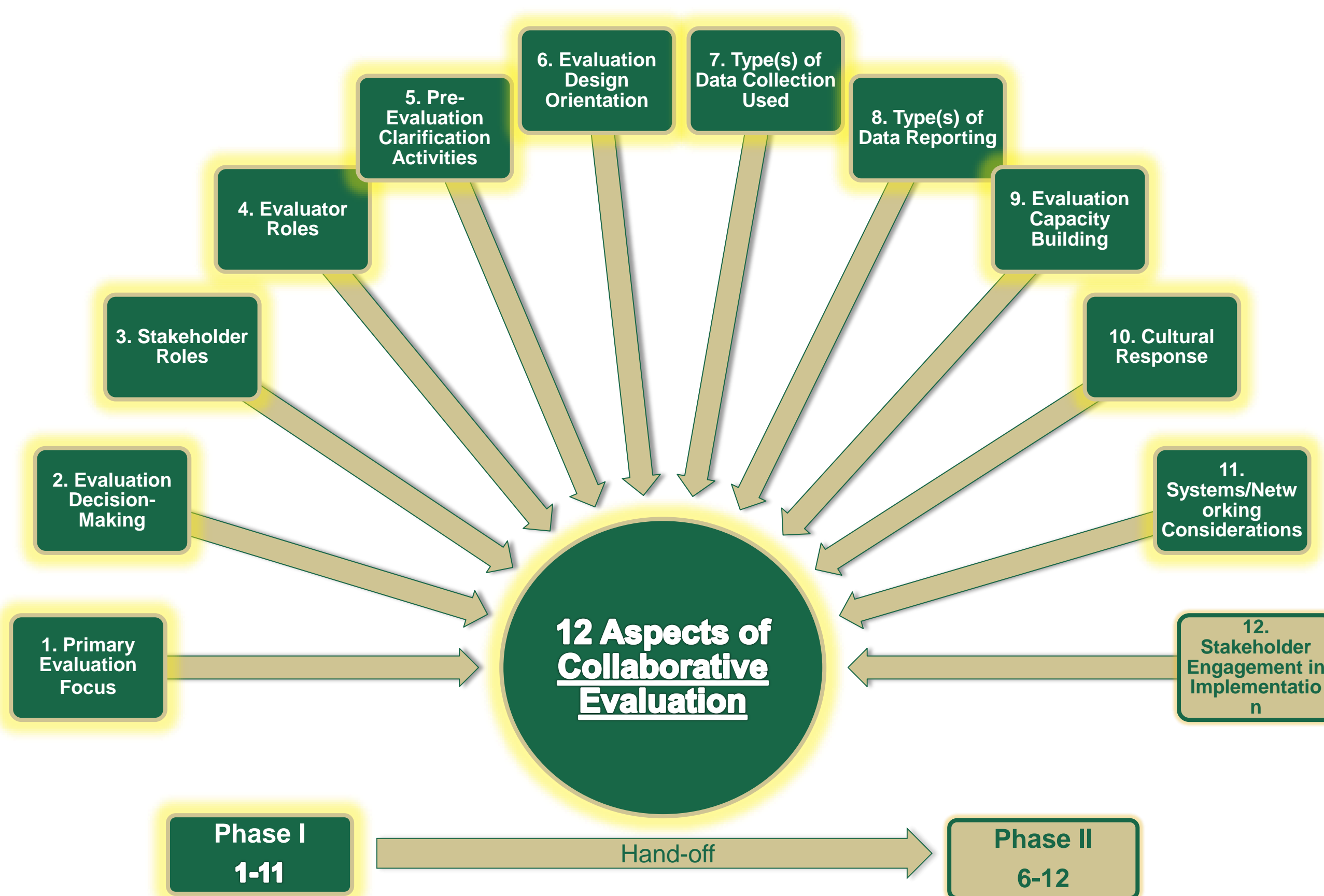
## Purpose

Provide consultation and increased **NCQA-PCMH** redesign support for small practice settings seeking to undertake the NCQA-PCMH recognized transformation through the development of a training process for clinicians seeking PCMH recognition and doctoral nursing students.

## Background

- The National Association for Quality Assurance lends its name to the most comprehensive and standardized patient-centered medical home recognition process (**NCQA-PCMH**)
- NCQA-PCMH** designation:
  - Optimizes healthcare delivery
  - Decreases utilization of emergency departments
  - Decreases specialty consultations, radiologic imaging, & laboratory diagnostics
  - Reduces healthcare expenditure per member receiving care under the medical home model
- The majority of primary care practices in the U.S. are:
  - Small in size
  - Lack the capacity & support to navigate the NCQA-PCMH process

## Framework

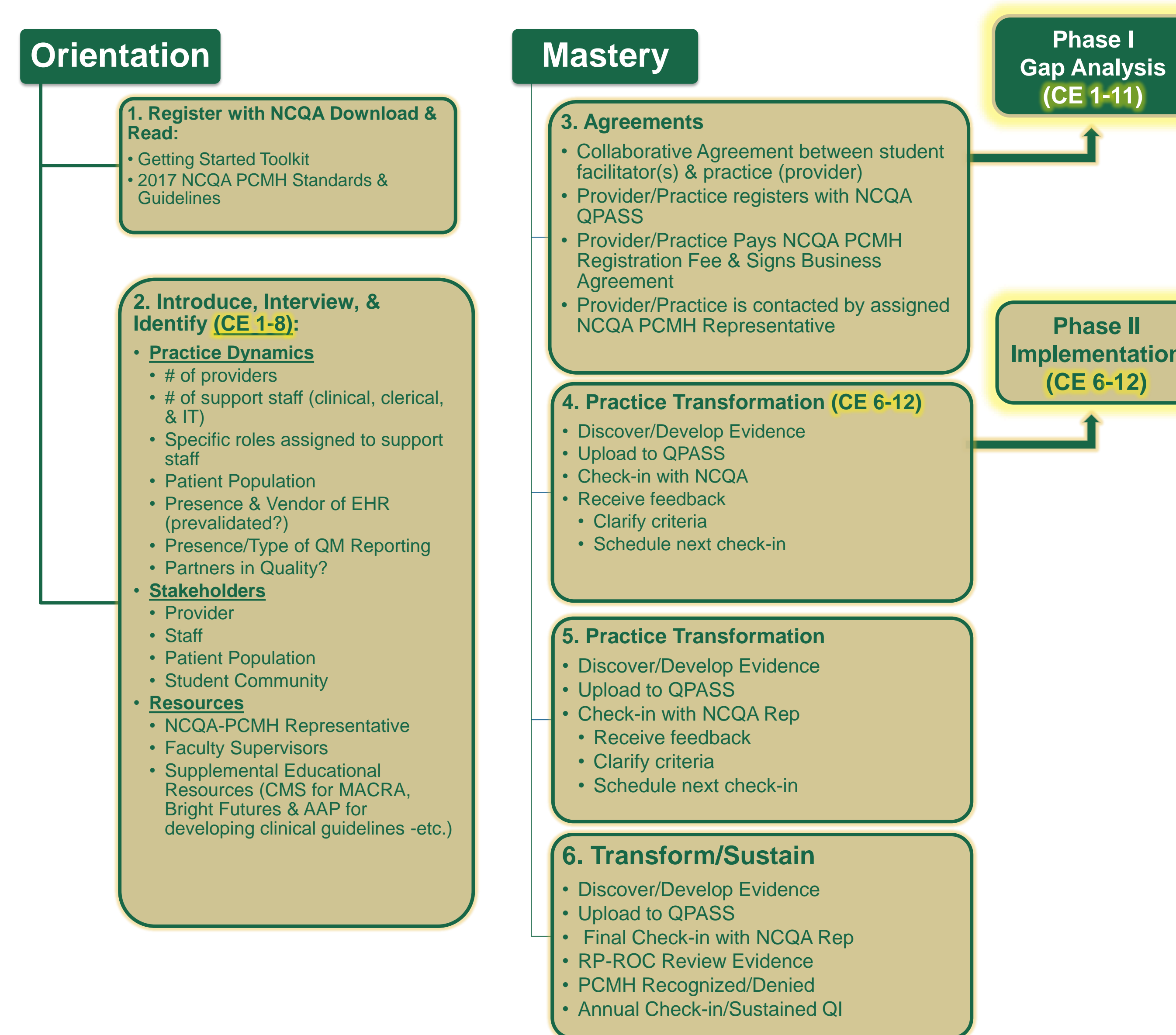


## Acknowledgements

- Catherine Gaines-Ling, PhD, FNP-BC, FAANP
- Sharlene Smith, DNP, MS, ARNP, CPNP
- Debra Friedrich, DNP, ARNP, FNP-C, CLS, FNLA
- Melanie J. Michael, DNP, MS, FNP-C, CPHQ, FNAP

## Methods

### NCQA-PCMH Process Map



## Gap Analysis Results

Medical Home Concept (# of Core / # Elective Criteria)	Total Criteria Met (Core / Elective)	Total Criteria Needed (Core / Elective)	Total Action Items
Team-Based Care & Practice Organization (TM) (5 Core / 3 Elective)	0 / 0	5 / 3	10
Knowing and Managing Your Patients (KM) (10 Core / 13 Elective)	0 / 0	10 / 13	44
Patient-Centered Access and Continuity (AC) (7 Core / 5 Elective)	0 / 0	7 / 5	20
Care Management and Support (CM) (4 Core / 5 Elective)	0 / 0	4 / 5	15
Care Coordination and Care Transitions (CC) (5 Core / 8 Elective)	0 / 0	5 / 8	27
Performance Measurement and Quality Improvement (QI) (9 Core / 1 Elective)	0 / 0	9 / 1	33

## Limitations

- Design and delivery of the self-study training program for the doctorate students is the glaring limitation to the overall success of the project
- It was originally intended that self-study materials would be reinforced with live information sessions for clarification of content and practice specifics
- Rapid cycle review of assessment scores would have potentially identified barriers to knowledge acquisition

## Discussions

- The application of the framework of **Collaborative Evaluation** at the practice site resulted in the NCQA-PCMH process map and gap analysis which are 2 superlative products of Quality Improvement
- Collaborative evaluation enhanced the provider's willingness to move forward with the undertaking of the NCQA-PCMH recognition process
- Immersion and reinforcement of the NCQA-PCMH 2017 Standards and Guidelines are necessary in order to brace for practice evaluation and the implementation that follows during the recognition process

## Gap Analysis

