

11.1

Clinician who is member of care team or PO staff person is educated about and familiar with self-management support concepts and techniques and works with appropriate staff members at the practice unit at regular intervals to ensure they are educated in and able to actively use self-management support concepts and techniques.

PCP and Specialist Guidelines:

- a. The intent of this capability is to actively empower the staff within the practice unit to incorporate self-management support efforts into routine clinic process.
- b. Regular intervals are defined as a minimum of once per year
 - i. New staff must be trained at time of entry to practice
- c. Self-management support uses a team-based, systematic, model-driven (including behavioral and clinical dimensions) approach to actively motivating and engaging the patient in effective self-care for identified chronic conditions; must extend beyond usual care such as encouragement to follow instructions
- d. Level, type, and intensity of training, education, and expertise may vary, depending upon team members' roles and responsibilities in the Practice Unit
 - i. Education must be substantive and in-depth and focus on a particular model of self-management support and not consist of only a brief introduction to the concept. Recommended sites for more information include:
 - IHI Partnering in Self-Management Support: A Toolkit for Clinicians
 - <http://www.ihl.org/knowledge/Pages/Tools/SelfManagementToolkitforClinicians.aspx>
 - Self-Management Support Information for Patients and Families: <http://www.ihl.org/resources/Pages/Tools/SelfManagementToolkitforPatientsFamilies.aspx>
 - California Health Care Foundation Self-Management
 - <http://www.chcf.org/publications/2009/09/selfmanagement-support-training-materials>
 - Flinders Self-Management Model: http://www.flinders.edu.au/medicine/fms/sites/FHBHRU/documents/publications/FLINDERS%20PROGRAM%20INFORMATION%20PAPER%20FINAL_M.pdf
 - Motivational Interviewing
 - <http://www.motivationalinterviewing.org/>
- e. Education of practice unit staff members may be provided by PO staff person if the PO staff person has adequate time to provide comprehensive, meaningful education; otherwise, practice unit is responsible for identifying a member of the practice's clinical care team to receive education in self-management support concepts and techniques
- f. Appropriate team members should have awareness of self-management concepts and techniques, including:
 - i. Motivational interviewing
 - ii. Health literacy/identification of health literacy barriers
 - iii. Use of teach-back techniques
 - iv. Identification of medical obstacles to self-management
 - v. Establishing problem-solving strategies to overcome barriers of immediate concern to patients
 - vi. Systematic follow-up with patients

Required for PCMH Designation: NO	Predicate Logic: n/a
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • Must be in place before 11.2-11.7 • No formal training needed (train the trainer okay), i.e. PTI training, self-management toolkit. 	
<ul style="list-style-type: none"> • Regular, ongoing staff education regarding self-management techniques. Motivational interviewing, health literacy, teach backs, identification of obstacles • Describe how training has supported interactions with patients in coaching them toward self-efficacy (Minimum 1x/yr. and new staff trained at time of entry into practice). 	

11.2

Structured self-management support is systematically offered to all patients in the patient population selected for initial focus (based on need, suitability, and patient interest)

PCP and Specialist Guidelines:

- a. Self-management support is assisting patients in implementing their action plan through face-to-face interactions and/or phone outreach in between visits.
- b. Self-management support services may be provided in the context of a planned visit
- c. An action plan is a patient-specific goal statement that incorporates treatment goals including aspects of treatment that involve self-management. It is not an action step; it is a goal statement.
- d. Physicians may provide self-management support within the context of E&M services
 - i. At least one other trained member of the care team must be designated as a self-management support resource, with time allocated to work with patients

Required for PCMH Designation: NO	Predicate Logic: 11.1
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • Which chronic condition has been chosen as a focus for self-management? • How are patients engaged in self-management? • What tools are used? 	

11.3

Systematic follow-up occurs for all patients in the patient population selected for initial focus who are engaged in self-management support to discuss action plans and goals, and provide supportive reminders

PCP and Specialist Guidelines:

- a. Follow-up may occur via phone, email, patient portal, or in person, and must occur at least monthly.

Required for PCMH Designation: NO	Predicate Logic: 11.1
PCMH Validation Notes for Site Visits	

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| <ul style="list-style-type: none"> • How do you follow up with those patients engaged in self-management and how do you track those patients? • Provide examples of phone outreach between visits? Documentation in the EMR? |
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11.4

Regular patient experience/satisfaction surveys are conducted for patients engaged in self-management support, to identify areas for improvement in the self-management support efforts

PCP and Specialist Guidelines:

- Surveys may be administered electronically, via phone, mail, or in person
- Results must be quantified, aggregated, and tracked over time
- Self-management support survey questions may be added to regular patient satisfaction surveys providing sampling is structured to ensure adequate responses from those who actually received self-management support services
- If survey results identify areas for improvement, timely follow-up occurs (e.g., self-management support efforts are systematized to assure they are available on a timely basis to all patients for whom they are appropriate)

Required for PCMH Designation: NO	Predicate Logic: 11.1, 11.2
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • Documented survey results • Demonstrate examples of areas of improvement and action taken based on survey results • Have results improved based on actions taken? 	

11.5

Self-management support is offered to multiple populations of patients within the practice’s patient population (based on need, suitability and patient interest)

Required for PCMH Designation: NO	Predicate Logic: 11.1, 11.2
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • How do you engage patients in self-mgmt? • What tools are you using? • What chronic condition/s have you chosen for self-management? 	

11.6

Systematic follow-up occurs for multiple populations of patients within the practice’s patient population who are engaged in self-management support to discuss action plans and goals, and provide supportive reminders

PCP and Specialist Guidelines:

- Follow-up may occur via phone, email, patient portal, or in person, and must occur at least monthly.

Required for PCMH Designation: NO	Predicate Logic: 11.1, 11.3
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • How do you follow up with those patients engaged in self-management and how do you track those patients? • Provide examples of phone outreach between visits • Documentation in the EHR? 	

11.7

Support and guidance in establishing and working towards a self-management goal is offered to every patient, including well patients (e.g., asking well patients about health goals)

PCP and Specialist Guidelines:

- a. Self-management goal is developed collaboratively with the patient and is specific and reflective of the patient’s interests and motivation

Required for PCMH Designation: NO	Predicate Logic: n/a
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • How do you engage patients in self-management? • What tools are you using? • How do you follow up with patients engaged in self-management and how do you track those patients? • Provide examples of phone outreach between visits • Documentation in the EHR? 	

11.8

At least one member of PO or practice unit is formally trained through completion of a nationally or internationally-accredited program in self-management support concepts and techniques, and regularly works with appropriate staff members at the practice unit to educate them so they are able to actively use self-management support concepts and techniques.

PCP and Specialist Guidelines:

- a. Training for self-management techniques should include:
 - i. Motivational interviewing
 - ii. Health literacy/identification of health literacy barriers
 - iii. Use of teach-back techniques
 - iv. Identification of medical obstacles to self-management
 - v. Establishment of problem-solving strategies to overcome barriers of immediate concern to patients
 - vi. Systematic follow-up with patients
- b. Practices should seek structured information/approaches/processes, which can be from any legitimate source
- c. Self-management training of the practice unit staff must be provided directly by the individual(s) certified as completing the formal self-management training

- i. A “train the trainer” model, where, for example, a PO staff person who has completed a formal self-management training program trains practice consultants, who in turn train practice unit staff, does not meet the requirements for this capability.
- ii. Examples of training programs that meet the criteria are available from the PGIP Care Management Resource Center at <http://micmrc.org/system/files/micmrc-approved-self-management-support-mcm-program-summary-v12a.pdf>
- iii. Such programs must be sufficiently robust that they provide ample opportunities for learners to practice new self-management support skills with individualized feedback as part of the practice experience.

Required for PCMH Designation: NO	Predicate Logic: n/a
PCMH Validation Notes for Site Visits	
<ul style="list-style-type: none"> • Describe how the training has supported interactions with patients in coaching them toward self-efficacy? • Example: Stanford Certified Self-Management Team member 	