PCMH Transformation: Building on Change

After you've laid the foundation for your practice transformation, you're ready to tackle the core principles of the patient-centered medical home (PCMH) model. Work with your practice staff to create a plan around your practice's organization, quality care, and patient-centered care goals. Remember to work at your own pace—the practice transformation process takes time. Even incremental change will result in practice improvement.

CHECKLIST

Practice Culture	Population Health Management
☐ Establish a PCMH transformation team and define your goals.	 ☐ Learn about population health management. ☐ Select and use patient registries for
 Develop a project plan, lead practice change, and monitor progress. 	population health management. Implement planned care for chronic and
Staffing: Team-Based Care	preventive services.
Understand the basics of team-based care.Define team member roles and implement team-based care.	Patient Access to Care ☐ Give patients the ability to schedule same-day appointments.
Integrated and Coordinated Care ☐ Create a team to oversee care transitions.	Add extended-hours access to routine and urgent care.
☐ Coordinate and monitor care transitions	Patient Self-Management
across the medical neighborhood.	☐ Prepare to implement patient self-
☐ Use performance measures to evaluate and	management support.
improve care transition processes.	Use and develop patient care and action plans.
☐ Build relationships with community resources.	Consider home monitoring for chronic conditions.
	Use motivational interviewing to coach patients.

Implement this checklist with the help of step-by-step guides. Purchase the PCMH Planner at aafp.org/pcmhplanner.

