

Practice coach skills and knowledge self-assessment survey

Practice Coach Development Program

Partnership HealthPlan of California with Signal Key Consulting

Content knowledge for practice coaches

Five-point response scale

Novice: Little to no experience/knowledge

Competent: Some familiarity and experience; Can do with assistance

Proficient: Can do on my own

Expert: Could assist/guide someone else in doing this

Master: Could teach this

| Topic list | Novice | Competent | Proficient | Expert | Master |
|--|--------|-----------|------------|--------|--------|
| QI PROJECT LEADERSHIP | | | | | |
| 1. Basic project/task management | | | | | |
| 2. Project selection/scope | | | | | |
| 3. QI project charter development | | | | | |
| 4. Effective meeting management | | | | | |
| 5. Best practices of meeting facilitation | | | | | |
| 6. Spread of successful changes to other staff/sites | | | | | |
| 7. Sustainability (operations and monitoring) | | | | | |
| APPLYING THE MODEL FOR IMPROVEMENT | | | | | |
| 8. Aim statement development | | | | | |
| 9. Selecting QI project measures | | | | | |
| 10. Identifying change ideas | | | | | |
| 11. Testing changes using the PDSA cycle | | | | | |
| 12. Implementing changes within a health care practice | | | | | |
| 13. Creating driver diagrams | | | | | |
| 14. Developing a process flow map | | | | | |
| 15. Collecting/analyzing <i>qualitative</i> feedback for QI | | | | | |
| 16. Common cause versus special cause variation | | | | | |
| 17. Creating run charts | | | | | |
| 18. Interpreting run charts | | | | | |
| CHANGE LEADERSHIP, THE HUMAN SIDE OF CHANGE | | | | | |
| 19. Selecting and leading an improvement team | | | | | |
| 20. Teaching the Model for Improvement | | | | | |
| 21. Creating expectations and accountability in a team | | | | | |
| 22. Effective delegation | | | | | |
| 23. Conflict resolution (e.g. having difficult conversations) | | | | | |
| 24. Engaging patients in improvement | | | | | |
| SAFETY NET MEDICAL HOME INITIATIVE: 8 CHANGE CONCEPTS | | | | | |
| 25. Engaged leadership | | | | | |
| 26. Quality improvement strategy | | | | | |
| 27. Empanelment | | | | | |
| 28. Continuous and Team-based healing relationships | | | | | |
| 29. Organized, evidence-based care | | | | | |
| 30. Patient-centered interactions | | | | | |
| 31. Enhanced access | | | | | |
| 32. Care coordination | | | | | |

Practice coaching competencies

Four-point response scale

Strongly Agree/Agree/Disagree/Strongly disagree

| Coaching competency |
|---|
| 1. I feel confident in my ability to support a Quality Improvement project in each phase, beginning to end. |
| 2. I feel confident in my knowledge and ability to help a project team engage leaders in their organization to ensure their success. |
| 3. I know how to support a QI champion or project lead in engaging colleagues to participate in a QI project. |
| 4. I feel confident in my ability to model the use of <i>run charts</i> for learning and decision-making. |
| 5. I feel confident in my ability to model the use of <i>PDSA testing cycles</i> for learning and decision-making. |
| 6. I have participated in QI projects or initiatives in the past. |
| 7. I know the foundational elements of successful team-based primary health care and can help an improvement team identify strengths and needs related to these requirements. (Empanelment is one foundational element, for example.) |
| 8. I know how to coach QI project teams to include patients in their improvement work, from PDSAs to formal advisory activities. |
| 9. I can advise an organization or a project team on what they need in infrastructure and team roles in order to have regular reliable data on their performance. |
| 10. I can advise an organization or a project team on the resources and practices needed to sustain the gains of a QI project, including how to manage a portfolio of QI projects and communicate across the organization. |