

## Memphis, TN

TURNING ON LIGHT BULBS: PROJECT BETTER CARE
WORKS TO IMPROVE PRIMARY CARE IN MEMPHIS

he Aligning Forces for Quality (AF4Q) initiative in Memphis is led by Healthy Memphis Common Table (HMCT). The organization was established in 2003 as a result of a communitywide forum calling for the creation of an organization to coordinate health improvement activities throughout Memphis. Its mission is to support and encourage people to work together to ultimately make Memphis one of the healthiest cities in America. HMCT brings together key stakeholders such as consumers, health care providers, insurers, employers, government, advocacy groups, schools, universities, civic groups, and neighborhoods. More than 200 partner organizations have joined HMCT's efforts. Its initiatives include reducing obesity and diabetes, reducing disparities in health care, helping consumers understand what quality care is, and more. Convincing all Memphis-area residents to live healthier lifestyles is a huge task, but HMCT is up to the challenge. In fact, the U.S. Department of Health and Human Services has recognized HMCT as a promising national model for a regional health collaborative.







## Turning on Light Bulbs: Project Better Care Works to Improve Primary Care in Memphis

Healthy Memphis Common Table (HMCT), leader of the Aligning Forces for Quality initiative in Memphis, has taken on the challenge of engaging small health care practices to improve primary care with Project Better Care. Project Better Care is a partnership with the Healthy Memphis Common Table, The Memphis Medical Society, and Bluff City Medical Society to engage primary care providers and their patients to better manage Type 2 diabetes.

Partnerships with the two area medical societies were essential with initiating Project Better Care. The medical societies were integral with identifying small primary care practices to participate.

Project Better Care assists practices and their patients in two ways: through learning sessions for providers and staff, and patient coaching for highneed patients.

Five small primary care providers were identified, assessed, and engaged in Project Better Care by the end of 2011. Creating an infrastructure where quality can be improved is challenging. Small practices have few resources at their disposal. "This really has to be a whole-practice transformation," said Renee' Frazier, chief executive officer of HMCT.

For example, only one provider had an electronic medical record system (EMR) when Project Better Care began. The providers had difficulty tracking patients' data and could not assess how patients with diabetes were faring. Practices also had no information about patients' emergency room use, which is now identified as a gap in the system of care.

## There's going to be more of a focus on preventive care and less on illness care.

Project Better Care assists practices and their patients in two ways: through learning sessions for providers and staff, and patient coaching for high-need patients. "It's a process of turning on these light bulbs for these practices," said Frazier.

Periodic learning sessions give providers and staff the opportunity to explore new topic areas and learn from colleagues' experiences. Opening practices up to the latest ideas and innovations is about raising all boats. "These practices want to be competitive, and Project Better Care enables them to do that," said Frazier.

Quality Improvement Coordinator for Project Better Care Carla Baker has seen small changes make a big difference. "There was a manpower issue. Staff within a practice were not being used to their full potential. The person at the front desk can be more than a receptionist—they can help with medical



records, referrals, and direct patients to community resources," Baker said. Under practice coaching, practices have taken some of the burden off of the physicians and redistributed responsibilities around practices to improve flow.

High-need patients receive help from a patient coach to overcome barriers to improving their health. Through motivational interviewing methods, practice coaches help patients increase consistency with following their individual care plans, reduce emergency room visits, and change how they interact with their primary care provider.

The Alliance is working with Project Better Care practices to enhance their data capabilities so they can better monitor patient health and guide quality improvement efforts. Now, four out of five providers use an electronic medical record system, and the fifth is seeking a vendor for services. Practices shared their experiences with different EMR vendors to benefit the whole cohort. They are tracking patients with diabetes and scoring their treatment of chronic conditions using national guidelines.

The goal is to eventually help small primary care practices provide the highest possible level of care. "There's going to be more of a focus on preventive care and less on illness care," said Baker. "The commitment of these practices has helped them come a long way."

