Use of learning collaborative in the implementation of Patient-Centered Medical Home model in the state of Maryland: What are the facilitators and barriers?

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The dissertation goal was to understand the role of a "learning collaborative" in the implementation of Patient-Centered Medical Home (PCMH) activities by primary care practices in the State of Maryland and how that role was affected by other factors. The key research question was: How has the Maryland Learning Collaborative affected the process of implementing the PCMH model within primary care practices in the State of Maryland and what factors have moderated its effectiveness?

The dissertation followed a case study design and involved collection of primary data through semi-structured interviews with 18 respondents from 9 practices and 2 key informants from the program. Key findings of the study include: 1) learning collaborative helped practices to go through PCMH recognition process, improve quality of care and facilitated key changes within practices including practice re-design and care management institutionalization, 2) practice operational leadership and management support was important for effectiveness of learning collaborative activities, 3) group meetings and events organized by the collaborative were useful for benchmarking and peer learning but the lack of performance data to guide these activities limited level of impact and, 4) development of the care management function was considered one of the significant contributions of the learning collaborative. In addition: 1) financial incentives were critical for practice participation in learning collaborative activities, 2) several practices felt they possessed the internal capability to implement the PCMH with or without MLC involvement, and 3) routine use of data to inform the learning and improvement/change agenda was lacking. Other findings include: 1) the learning collaborative provided a medium for group motivation and inspiration to implement change, 2) the role of practices in defining and driving the learning agenda was not clarified and fully exploited, 3) sustainability of learning collaborative activities was not addressed and, 4) peer learning was not fully exploited because there was no structured learning approach and agenda. Overall the findings show that an external change agent is important in facilitating practice transformation into primary care medical home. This study reinforces the need for supporting transformations within practices because of required significant cultural and organization changes.