# College of Public Health

### BACKGROUND

Many rural Appalachian communities are burdened by In October 2017, qualitative interviews were conducted with three leaders (Chief Executive Officer [CEO], Quality health disparities, with residents less frequently engaging in Improvement Director, Director of Operations) at a FQHC covering five counties in rural Appalachian Kentucky. The FQHC had preventive care. To improve outcomes among this adopted components of a proactive office encounter (POE) approach based on a peer FQHC's implementation of POE; the population, health organizations must focus on closing POE model was originally developed by Kaiser Permanente. Interview questions focused on how FQHC leadership learned preventive care gaps. However, many rural health systems about the POE model and related materials such as a health maintenance form (Fig. 2), which helps identify and close care - such as Federally Qualified Health Centers (FQHCs) gaps; why they decided to adopt this new strategy; and how it was implemented across their clinics. may have limited organizational resources to learn about Health Maintenance Adult General and adopt new strategies.

Of interest is how FQHCs learn about innovative strategies to improve patient health and how the new strategies are implemented into current practice. To date, few studies have examined FQHC information-seeking behaviors involving evidence-based strategies and interventions.

The objective of this case study was to examine the dissemination of innovative approaches focused on improving preventive care among FQHCs in rural Appalachian Kentucky (Fig. 1).



Figure 1. Map highlighting Appalachian Kentucky counties



## **Dissemination of innovative practices among FQHCs:** A case study from rural Appalachian Kentucky

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	Due Date	Completed	Completed Today	Ordered	Declined	Performed Elsewhere	Report Received
Colorectal Cancer Screen							
Flu							
Pneumonia							
PHQ-9							
BMI & Edu q6m							
Tobacco Use & Education							
Fall Risk							
UDS							
Contract							
Kasper							

**Figure 2.** Excerpts of the health maintenance form and qualitative interview questions

The FQHC learned about POE during a presentation given by the peer FQHC CEO at the state Primary Care Association meeting. The FQHC was already reviewing patient charts for care gaps, but wanted to improve their current protocols. Specifically, the FQHC adapted the health maintenance form, revising it to include selected health measures and programming it into their electronic medical record system.

# FQHC QUOTES RELATED TO POE

"I don't remember if it was the Kentucky Primary Care Association Conference or [Kentucky] Health Center Network, but one of those...I've heard the CEO talk about it and I'm like that's a really great idea and things we need to do." – On how the FQHC learned about POE

"The scrub sheet that they use, and they did a really good job, I think, in their presentation, so I really got the concept. It was like I just need a good form to go off of ... "

"Cause we were already doing it, but we were doing it right when the patient was there...and have a better system for doing that, we would spend more time with the patient while the patient's here. And be able just to focus on what they need instead of trying to track everything else down."

### METHODS

#### INTERVIEW QUESTIONS

How did you first learn about the Proactive Office Encounter (POE)?

Did any other healthcare organization give you any materials on POE?

Were there aspects of the POE framework that you decided not to implement?

### FINDINGS

– On POE-related items shared between FQHCs

– On why POE was a good fit for their FQHC

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#### IMPLICATIONS







networking among FQHCs Peer-to-peer appears to be an important way to disseminate innovative patient care strategies in rural settings.

External entities, such Primary Care as Associations, health center community networks, and academic partners, can facilitate the dissemination process providing by additional resources for technical assistance implementation websites, toolkits, (e.g., presentations and trainings).

Case study findings are currently being used to develop a statewide survey of FQHCs, which will assess staff's information-seeking behaviors about innovative care practices and related implementation processes.



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