



ASAP Comprehensive Literature Review

1, Practice facilitation to support change

Question

1. What are the best practices for improvement support for primary care?
2. What are the benefits of practice facilitation in primary care?

Summary of findings

Best practices in practice facilitation:

- Incorporate audit and feedback
- Employ established quality improvement tools, such as PDSA
- Tailor techniques and tools to specific practice needs
- The greater the intensity of the intervention, the greater the impact
- Facilitators require extensive training

Benefits of practice facilitation:

- Primary care practices are 2.76 times more likely to adopt evidence-based guidelines through practice facilitation.
- Practice facilitators increase preventive service delivery rates
- Facilitation leads to improved practice processes and patient care outcomes
- Increases practices' capacity for change

Search

Searched PubMed April 2013 using the following terms:

((("primary care" OR "family medicine" OR "general practice" OR "family physician" OR "practice-based research" OR "practice enhancement" OR "practice-based education" OR "office system" OR improvement OR "medical home") AND (facilitator OR facilitation OR coaching OR coaches)) OR "practice coaching" Limits: last 10 years, English. Title/Abstract
872 results.

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Best practices

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Benefits & impact

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2. Screening and prevention outreach

Question

What are the best practices in primary care for:

1. Opportunistic screening and prevention processes
2. Outreach screening and prevention processes

Summary of findings

- Best strategies differ, depending on screening maneuver.
- Overall evidence seems to favour client reminders combined with small media (flyers etc) for patient outreach
- For physician outreach, reminders work, although the evidence is not solid for electronic reminders. Assessment and feedback are also effective, but incentives such as CME credits are not proven at this point
- Nothing found for opportunistic screening practices, however, physician reminders can work for opportunistic screening practices
- Most evidence is for cancer screening. Very little found for cardiovascular screening/prevention outreach. Perhaps because there is no demand to increase screening for these conditions

Search

Searched PubMed March 2013 using the following terms:

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((recruitment[TIAB] OR uptake[TIAB] OR participate[TIAB] OR participation[TIAB] OR nonparticipation[TIAB] OR Response[TIAB] OR nonresponse[TIAB] OR responders[TIAB] OR "non participants"[TIAB] OR engagement[TIAB] OR compliance[TIAB] OR noncompliance[TIAB] OR adherence[TIAB] OR nonadherence[TIAB] OR Attendance[TIAB] OR nonattendance[TIAB] OR attenders[TIAB] OR retention[TIAB] OR "drop out"[TIAB] OR dropout[TIAB] OR dropouts[TIAB] OR drop-outs[TIAB] OR Acceptance[TIAB] OR nonacceptance[TIAB] OR recall[tiab] OR outreach[tiab] OR opportunistic[tiab] OR spontaneous[tiab] OR prompts[tiab] OR prompted[tiab] OR prompting[tiab] OR reminder[tiab] OR reminders[tiab])) AND ("preventive medicine"[MeSH] OR "secondary prevention"[MeSH] OR "primary prevention"[MeSH] OR "secondary prevention"[TIAB] OR "primary prevention"[TIAB] OR "preventive care"[TIAB] OR "preventive therapy"[TIAB] OR "preventive treatment"[TIAB] OR "selective prevention"[TIAB] OR "programmatic prevention"[TIAB] OR "programmatic intervention"[TIAB] OR "indicated prevention"[TIAB] OR screening[TIAB] OR "mass screening"[MeSH])) AND systematic[sb]. Limits: last 10 years, English. 1396 results.
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Patient outreach

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3. EMR use in screening & prevention

Question

What are the best practices for EMR utilization to support increased screening and prevention outreach and opportunistic processes?

Summary of findings

EMRs have been effectively used in various ways for screening and prevention. There is not enough literature to generalize best practices, but we can learn from the following successful examples. These include:

- Using the EMR to generate lists and reminders of patients that need to be contacted for screening at a certain point in time
- Using the EMR to identify those at risk for a condition, and using that information to invite these people for targeted screening.
- Using the EMR for screening follow-up.

Search

Searched PubMed, March 2013 using the following terms:

((("Electronic Health Records"[mesh] OR "electronic health records"[tiab] OR "EMR"[tiab] OR "electronic medical records"[tiab] OR "electronic medical record"[tiab])) AND ("preventive health services"[mesh] OR screening[tiab] OR screenings[tiab] OR prevention[tiab] OR preventive[tiab] OR "health check"[tiab] OR "health checks"[tiab])) AND ("last 10 years"[PDat] AND English[lang])

961 results.

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