The Health Home Basic Care Coordinator curriculum incorporates four breakout work group exercises using the vignettes and two activities for participants. The four breakout small group activities using the vignettes include:

* PRISM and Outreach
* The Patient Activation Measure
* Health Action Planning
* HAP update

Breakout groups will vary depending on the number of participants in a class. Trainers may choose to strategically assign attendees who have experience in certain healthcare professions to specific groups in order to distribute expertise and provide depth to these sessions. For example, it may be beneficial to assign a nurse, social worker, and mental health specialist in each group to provide a wider range of expertise within each group.

For smaller classes the trainer may present one or more of the vignettes. The trainer may also consider demonstrating the vignette exercises for the group by having the entire class discuss one or more of them prior to starting the group activities. The intent is to cover at least four of the vignettes during the training. For smaller classes each group may be assigned more than one vignette to discuss. Groups use the same vignette/s for the small group activities throughout the day.

Trainers should prepare for the vignette activities by posting flip charts for each work group in advance of the activity. This may be done at the beginning of the day and during breaks. Instruct the groups to identify a recorder and a reporter. The flip chart notes can be used to reinforce concepts and provide an opportunity for describing care coordination services and how they vary depending upon the unique needs of their clients. Refer to the vignettes and flip charts when:

* wrapping up a section of the training,
* reviewing important concepts at the end of the training. This wrap-up will review the breakout activities and focus on the core responsibilities of the Care Coordinator, which includes outreach and engagement, reviewing PRISM data, administration of the PAM/CAM/PPAM® and development and revision of the HAP.

This icon in the PowerPoint indicates a breakout exercise or activity: 

The PowerPoint contains slides to cue the trainer to introduce the breakout sessions.

During the breakout activities trainers should check in with each group to ensure that they understand the activity, are completing the assignment, and answer any questions. The length of time needed to complete group work will vary and may last 20 to 45 minutes depending on the activity and size of the class.

In addition to the four breakout activities for the vignettes there are two other activities. The PRISM Homework on Sacha and the active listening using Motivational Interviewing activity. The Motivational Interviewing activity is completed in pairs and occurs during the Health Action Planning section of the training. There is a slide to cue the trainer to introduce the “Resisting the Righting Reflex” pairs activity.

The following describes:

* the purpose of the vignette exercises
* questions to discuss during small group work, and
* activities for the work groups to complete

**Breakout #1: PRISM and Outreach**

The purpose of this breakout group is to:

* Introduce the vignettes by reviewing the client profiles. Participants will review the Health Home Client document for their assigned vignette/s. On the flip chart the group will write a profile of their client in a few words. Based on the information provided group members will share their ideas about how they may reach out to the client and engage them in the program. Questions for the group to answer and record on their flip chart are:
  + What is the basic profile of your client: age, chronic disease, and living arrangement?
  + What actions would you take to contact the client and engage them in Health Home services?
* Introduce participants to the PRISM database and provide hands on experience navigating PRISM. Prior to this activity the trainer will demonstrate the functionality of PRISM by reviewing the various categories of data using one of the client vignette Excel spreadsheets. The PRISM data for the vignettes is contained in individual Excel spreadsheets for each client. These spreadsheets are available on the DSHS Health Home Trainers website located at: <https://www.dshs.wa.gov/altsa/health-home-trainers-manual>

Using a computer is a best practice as it provides experience navigating PRISM. One computer per ten participants is recommended if the PRISM reports will be reviewed on a computer. If computers are shared, then groups may take turns using the computer to practice using PRISM. One approach is to rotate the groups on the computer by having one group use the computer while the other group/s take a break. Paper copies of the PRISM data in the Excel spreadsheets for the vignettes must be provided when computers are not used for this breakout group exercise. These paper copies must be updated every six months. The Excel spreadsheets are formatted to automatically update claim data and other data each time they are opened. These updates provide timely claims and other data.

Based on the information in PRISM the group will discuss and analyze PRISM claims data including: use of inpatient and outpatient services, CARE, medication use, number of pharmacies used, types of services utilized, etc. Ask the groups to analyze the data and record their answers to the following questions:

* What was your client’s PRISM score and IP Admit Risk Score?
* What did you note about your client in reviewing the screens in PRISM?
* What issues or gaps in services did you identify that you would like to discuss with your client?
* What potential care coordination opportunities with providers do you see?

**Breakout #2: The Patient Activation Measure**

The purpose of this breakout group is to introduce participants to the Patient Activation Measure® (PAM®) reports for their vignettes. Participants will consider the PAM® activation score and PAM® level for their vignettes. The PPAM® for the child vignette (Luchita) may be reviewed by the instructor.

Questions for the group to answer are:

* What is the PAM® or PPAM® score for your client?
* What is the client’s or parent’s Level of Activation?
* What did you notice about his/her responses to the PAM/PPAM®?
* How would you begin to work with your client and/or parent in relation to their responses and Level of Activation?
* Did you consider if asking the paid or unpaid caregiver to complete the CAM® would be helpful in working with the client and their caregiver?

**Pairs Breakout: Resisting the Righting Reflex**

This activity is completed during the section on Moving Toward Health Action Planning before the HAP breakout group work. The purpose of this activity is for participants to work in pairs to experience active listening as both a speaker and a listener. During the activity speakers will share their thoughts and feelings about a behavior change that they have thought about making or have previously made but are having trouble maintaining. Listeners will practice using open-ended questions and limiting the number of close-ended questions. Listeners will neither agree nor disagree and will avoid sharing their opinions and experiences. Flip charts are not used for this exercise. Upon completion of the activity the trainer will lead a discussion about the participants’ experiences as both a listener and a speaker. The PowerPoint contains a slide with suggestions for questions to ask following the exchanges.

**Breakout #3: Health Action Planning**

The purpose of this breakout group is to gain experience working with the Health Action Plan (HAP). The group will complete the blank HAP form contained in the Classroom Training Manual by entering data from PRISM, the required screenings, and BMI. The group will review the screening forms and score them as if they were actually completed during a face-to-face visit. This provides participants an opportunity to work with the screenings, score them, and ask questions.

Considering their client’s PRISM results and Level of Activation the group will record on their flip charts to present to the class the following:

* One long term goal for the client
* One short term goal for the client
* Action steps to reach the short term goal
  + Include steps to be completed by the Care Coordinator, client, and collaterals
  + Include the begin and end dates for each action step

**Breakout #4: HAP Update**

The purpose of this breakout group is to gain experience updating the Health Action Plan (HAP). The group will update their initial HAP.

Considering their client’s PRISM results and Level of Activation the group will record on their flip charts to present to the class the following:

* Update your HAP (make up scores as needed for this activity)
* Write the following on the flip chart:
  + Update one of the short-term goals and action steps based on the client not completing the action steps
  + Update one of the short-term goals and action steps based on the client’s resistance to the action step and/or goal
  + Which of the 6 Health Home services might the client need now?
  + Which optional screenings might be helpful for your client?
  + Document your visit including follow-up from previous contact