





THE KRESGE FOUNDATION

KAISER PERMANENTE

blue 🗑 of california foundation

PRAPARE Readiness Assessment Tool

Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences

Use this tool to help identify your organization's readiness to implement PRAPARE.

Instructions for Use

You can use this tool in several ways:

- Distribute it to members of your leadership team in advance of a meeting where you will discuss its results
- Bring it to a leadership team meeting to discuss readiness
- Have a facilitator use it to rate your leadership team's meeting after a group discussion

The PRAPARE project is a major undertaking and significant leadership is needed to carry it out effectively. Be honest about the general state of affairs within your organization.

Tally the total number of checks made in each column. The more checks in the *moderately prepared* and *highly prepared* columns, the more ready your organization is ready for PRAPARE. If you find many checks in the *not yet prepared* column, look at the statements in the columns for *moderately prepared* or *highly prepared*. These will give you guidance on where you want your organization to be and how to get there. The assessment may suggest the need for organizational development prior to undertaking the PRAPARE project.

Readiness Area	Readiness Component	Not Yet Prepared	Moderately Prepared	Highly Prepared
Culture of Organization	PRAPARE is viewed as	 Only a national standard. 	 Primarily a project to collect social determinants of health (SDH) data. 	A component of clinical transformation to enable quality of care and patient health care improvement by identifying and addressing the SDH.
	The PRAPARE project management process includes	 The administrator primarily driving the project. 	 A large group of individuals primarily for communication purposes. 	 An identified Project Manager working across clinical, IT, leadership, and data staff.
	Health center stakeholder engagement	□ Is not feasible.	 Primarily consists of executive leadership 	 Is active, where all staff at all levels are engaged and understands the importance of the

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Adapted from Stratis Health Toolkit, www.stratishealth.org

Readiness Area	Readiness Component	Not Yet Prepared	Moderately Prepared	Highly Prepared
	Communication and buy-in: Staff	 Have not yet been told about PRAPARE implementation. 	 Have been given general information about PRAPARE implementation and training, but generally have little idea how it will impact their work. 	 project and its impact to patients' health and wellness Have been included in communications about the PRAPARE implementation, including some specific early planning and data collection training activities.
Leadership and Management	Leadership	 Believes PRAPARE implementation is necessary, but is divided as to the return on investment 	Has studied the pros and cons of implementing PRAPARE and can make an argument for why benefits outweigh costs.	 Understands the benefits of implementing PRAPARE and sets a clear and consistent vision for how SDH data collection supports efficiency and quality improvement goals.
	Quality and efficiency through PRAPARE implementation	 Have been discussed, but no specific goals for improvement have been made. 	 Is recognized, but not defined in a measurable way nor connected with PRAPARE implementation. 	 Is documented, with specific, reportable measures that are clearly connected with PRAPARE implementation.
	PRAPARE reports for management, quality improvement, etc	 Have not been defined or documented. 	 Have been partially defined but have not been documented. 	 Have been defined, documented, and requirements included in the data reporting documentation.
	PRAPARE data utility for developing interventions and community partnerships	 Have not been identified or documented. 	 Have been partially identified but have not been documented. 	 Have been identified and documented, and partnerships have been initiated.
	Staffing needs for PRAPARE implementation and use	 Have not been analyzed. 	 Are generally understood, but a staffing plan has not been developed. 	 Have been documented in a staffing model, detailing current and proposed needs.

Readiness Area	Readiness Component	Not Yet Prepared	Moderately Prepared	Highly Prepared
Workflow and Process Improvement	Current and proposed PRAPARE- enabled workflow, including estimated patient volumes and staffing are	Not developed.	 Generally expected to change and there is a focus on general improvement efforts, but specific information workflow and data mapping has not been initiated. 	 Understood to change, effort has been directed to assessing current workflow/ processes and there is good acceptance of need for standardization.
	PRAPARE-enabled referrals, and other patient-specific hand- offs	 Have not been evaluated. 	 Have been discussed but no specific plan exists. 	 Have been designed and requirements included in the planning documentation.
Technology	IT staff that will support PRAPARE implementation	 Are non-existent with total reliance on outsourcing 	Are able to maintain current systems and have limited experience with system integration or data conversion and tend to rely on the vendor to detail the tasks and activities.	 Have strong experience with system integration, data conversion and managing expert resources to fill internal skill or knowledge gaps.
	IT staffing for PRAPARE implementation, maintenance, infrastructure, and ongoing user support	 Has not been analyzed. 	 Has been analyzed, but staff have not yet been assigned or dedicated. 	Has been documented in a staffing plan and requirements have been included in the planning process.
	IT reporting requirements for PRAPARE implementation…	 Is generally understood to be needed but has not been evaluated. 	 Has been evaluated but not documented in the planning process. 	 Has been performed and requirements included in the planning process.
	IT data analytics requirements including data aggregation for PRAPARE implementation	 Is generally understood to be needed but has not been evaluated. 	 Has been evaluated but not documented in the planning process. 	 Has been performed and requirements included in the planning process.

Readiness Area	Readiness Component	Not Yet Prepared	Moderately Prepared	Highly Prepared
	An assessment of vendor changes necessary to support PRAPARE implementation and use	 Is generally understood to be needed but has not been evaluated. 	 Has been performed but not documented in the planning process. 	 Has been performed and requirements included in the planning process.
Please fill in the total items checked in each category:				

1. Please provide further comments or explanation of your responses above.

2. If you have checked items in the *not yet prepared* or *moderately prepared* column, please explain your plans to address them to move toward being *highly prepared*.

3. Were there other important readiness factors that were not included in this document that would be helpful for us to include in a future revision?

4. Please provide any further comments or feedback.