Workflow Assessment Guide

Before you start the analysis, note the names of the various clinic roles (e.g., front desk, medical records, medical assistant, operator, etc.). As you move through the guide, note who does what on each step.

This tool is meant to guide your workflow analysis. It includes processes that are common to most primary care offices, but it may not include all the processes of a particular office. So, before the analysis ends make sure to ask if any processes were missed. Then write down those steps.

As you proceed through the guide, think about hand-offs (of the chart, super-bill, etc.). Where do things end up--in bins, on desks, in drawers, etc.?

If you ask a clinic to fill out a guide (not recommended), make sure they note: (1) roles, (2) who does what, (3) missing processes, (4) and hand-offs.

Clinic name: _____

Individuals interviewed: _____

_____

Assessors: _____

Assessment date: _____

Pre Visit

Do you make reminders?
- ❑ Calls
- ❑ Letters/cards
- ❑ Does your system generate reminders?
- ❑ Do you send forms to the patient to complete before their visit?

What do you do to prepare for the next day's appointments (ask same-day appts. And walk-in patients)?
- ❑ Add forms to chart
- ❑ Print and add superbill/encounter form

When the chart is pulled does someone check for outstanding labs, missing consults, etc.?

What is done if something is missing?

Patient Visit

What do you do about no-shows?

What do you do with the chart with a no-show (policy vs. what really happens)?

What is your check-in process once the patient arrives?

- ❑ Information verification (how)
- ❑ Co-pay
- ❑ Papers the patient must sign
- ❑ Do you add forms to the chart before putting it up for the MA?

What do you do with papers the patient brings in/forms the patient signs?

How do you let the MA know the patient is ready to be seen?

Patient Visit: Nurse

Nurse begins visit (include where these items are done):

- ❑ Weight
- ❑ Vitals
- ❑ Review medications
- ❑ Chief complaint
- ❑ Ask about preventive/screening services due (e.g., mammogram, immunizations, lab tests)
- ❑ Other (e.g., foot exam, UA, strep screen, procedure set up)

What else does the MA document?

How does the MA notify the provider that the patient is ready and which is the next room?

- ❑ Chart in door
- ❑ Walkie-talkie
- ❑ Whiteboard
- ❑ Other:

Is there any communication between the MA and the MD other than that the patient is ready to be seen?

- ❑ Face-to-face
- ❑ Walkie-talkie
- ❑ Sticky note on the chart
- ❑ Whiteboard
- ❑ Other:

What type of information is communicated?

- ❑ Chief complaint
- ❑ Medications
- ❑ Preventive/screening services due
- ❑ Other:

Are there variations between MAs and between MA/provider teams?

Patient Visit: Provider Exam

Does the provider review the patient's chart prior to entering the room?

What is the process for reviewing the:

- ❑ Problem list
- ❑ Medication list
- ❑ Lab tests
- ❑ Preventive/screening services that are due

What does provider do if she needs something or needs the MA during visit (e.g., lab, equipment, exam assistance)?

What is the process when a patient has to leave the room for lab, x-ray, etc. and then comes back?

How are prescriptions written?

- ❑ Prescription pads in room
- ❑ Prescription pads carried by doctor
- ❑ Computer/printer (with an option to select drug and dosage from a list)
- ❑ Computer directly to pharmacy

Does the provider have a method to check for interactions/contraindications for medications?

What else does the provider document?

Does MA put anything else in the chart after the patient leaves?

Patient Visit Concludes

When is the visit documentation completed?

- ❑ As the visit concludes – **yes on most**
- ❑ Immediately after the visit in the nursing station
- ❑ Between visits, when the MD has time
- ❑ At the end of the day
- ❑ Days/weeks later
- ❑ Usually within _____hours/days

How is the plan of care documented?

Does the patient receive documentation of the plan?

Is there variability between providers in the time it takes to complete the chart?

What happens to the chart?

- ❑ Goes with patient to check out
- ❑ Goes to the doctors office
- ❑ Sits in the work area for MD to work on as he has time
- ❑ Other

Super-bill/Encounter form

Who documents on the super-bill?
Where does it go at the end of the visit?
How does it get there?
What are the steps until a bill is dropped?

Coders

Do they have the information they need?
How do they get their questions answered?

Patient Visit: Check-out Process

Who checks the patient out?

When are follow-up appointments made?

How is payment handled?

- ❑ Co-pay (before or after visit)
- ❑ Billing (e.g., for self-payers)

Who completes the super bill/encounter form?
Where does it go after the visit?

Care Management

Do you track any clinical indicators for patients with a specific disease or condition?

- ❑ Diabetes
- ❑ Heart disease
- ❑ Hypertension
- ❑ Mammography/Pap tests
- ❑ Other:

How do you identify the indicators?

How do you handle patients needing tests, monitoring, teaching, etc?

Patient Visit: Labs

Do you have an in-house lab? (describe the process): **no**

Outside lab (describe the process):

- ❑ Hospital
- ❑ Quest
- ❑ Labcorps
- ❑ Other:

How are lab results returned to the clinic, reviewed, and communicated to the patient?

What happens if patient can't be reached?

How do you know that labs were ordered, done, results returned, reviewed by provider, and given to patient?

Patient Visit: Referrals

Describe the ways patients obtain referrals (e.g., MA makes call, provider fills out form, etc.)?

How do you know the patient actually completes the referral?

Prescription Refills (phone, fax, pharmacy calls)
Describe process when a patient calls in for a refill:
Describe process when a patient asks for a refill during an office visit:
What happens when the pharmacy calls about a refill?
Phone Calls (other than for prescription refills)
What types of phone calls do you get most often:
Describe process for taking messages:
Describe process for returning patient phone calls:

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