Measure the impact of the expanded rooming and discharge protocols

Measure the impact of the expanded rooming and discharge protocols using the measurement tools provided below. Each is designed with a quality improvement framework that will allow you to see positive changes in your operational efficiency.

Consider (1) selecting one or two measurement tools, (2) monitoring each regularly and (3) sharing progress reports with staff during team meetings or huddles. Keep in mind that data collection can be completed by any member of the team who is involved in the improvement efforts.

**Measurement tools:**

[Measurement tool 1: Clinician administrative work time 2](#_Toc401319585)

[Measurement tool 2: Clinician experience survey 4](#_Toc401319586)

[Measurement tool 3: Patient experience survey 7](#_Toc401319587)

[Measurement tool 4: Staff experience survey 10](#_Toc401319588)

[Additional Information 13](#_Toc401319589)

Measurement tool 1: Clinician administrative work time

**Step 1: Track time spent documenting and coordinating patient care**

*Purpose****:*** *This log will measure the change in clinician time spent on administrative tasks, such as finishing notes and calling patients, during a clinic day before and after implementation of the rooming and discharge process.*

*Instructions: Each clinician (e.g., MD, NP or PA) in the practice can complete this tracking log at three time points: (1) at least one week before starting the new rooming and discharge process, which will serve as baseline data; (2) 12 weeks after implementation; and (3) 24 weeks after implementation. The tracking log accounts for five clinic days. If the clinician works fewer than that or is unable to complete the tool for each day, simply tally when possible.*

*Please track the number of hours spent documenting and coordinating patient care each day. The shaded gray cells have been included to guide you in transferring data through this multi-step tool and determining the value of your first time point.*

|  |  |  |
| --- | --- | --- |
| Clinician name: | | |
| **Clinic week:** | **Time spent documenting and coordinating patient care** | **Total # of hours** |
| Day 1: |  |  |
| Day 2: |  |  |
| Day 3: |  |  |
| Day 4: |  |  |
| Day 5: |  |  |
|  | Add daily totals to determine total number of hours per clinic week (numerator) |  |
| Number of days completed per clinic week (denominator) |  |
| Average time spent documenting and coordinating patient care by the clinician (numerator divided by denominator)  **Data to include in Step 2** 🡪 |  |

**Step 2: Determine practice average amount of time spent documenting**

**and coordinating patient care**

*Instructions: Determine the average amount of time spent documenting and coordinating patient care for all clinicians during the same week. Populate the chart below with individual clinician data calculated in Step 1. The numerator is the total time spent documenting and coordinating patient care for all clinicians who submitted data from Step 1. The denominator is the total number of clinicians who submitted data from Step 1.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Participating clinicians** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Clinician 1: |  |  |  |
| Clinician 2: |  |  |  |
| Clinician 3: |  |  |  |
| … |  |  |  |
| Clinician 10: |  |  |  |
| Total time spent documenting and coordinating patient care for all clinicians (numerator) |  |  |  |
| Total number of clinicians included (denominator) |  |  |  |
| Average time spent documenting and coordinating patient care for all clinicians in the practice (numerator divided by denominator)  **Data to include in Step 3 🡪** |  |  |  |

**Step 3: Graph your results**

*Instructions: Use a charting tool to graph the average time spent documenting and coordinating patient care before and after implementation. Your graph might look like the run chart below. Use this to discuss how you can improve the process with your team.*

Start of expanded rooming and discharge

# Measurement tool 2: Clinician experience survey

**Step 1: Survey clinicians**

*Purpose:**The purpose of this survey is to measure clinician satisfaction and understand the clinician experience as it relates to expanded rooming and discharge in the practice.*

*Instructions: Each clinician (e.g., MD, NP or PA) in the practice could complete this survey at three time points: (1) at least one week before starting the new rooming and discharge process, which will serve as baseline data; (2) 12 weeks after implementation; and (3) 24 weeks after implementation. Complete this survey to identify opportunities for performance improvement.*

*The shaded gray cells have been included to guide you in transferring data through this multi-step tool and determining the value of your first time point.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Clinician Survey** | | | | | | |
| Clinician name: | | | Date of Survey: | | | |
| Did a staff member work with you during today’s clinic session to assist with documentation? ⬜Yes ⬜No | | | | | | |
| *Thinking about today’s clinic session, rate the following statements based on frequency of your experience. Please circle your answer.* | | | | | | |
| 1. I can complete my visits without leaving the room to look for additional information or equipment. | 1 Never | 2 A little of the time | | 3 Some of the time | 4 Most of the time | 5 All of the time |
| 2. My staff is actively participating in documenting the patient visit. | 1 Never | 2 A little of the time | | 3 Some of the time | 4 Most of the time | 5 All of the time |
| 3. My team and I are able to address preventive and chronic care needs during the visit. | 1 Never | 2 A little of the time | | 3 Some of the time | 4 Most of the time | 5 All of the time |
| 4. I have all the information I need at the start of the visit. | 1 Never | 2 A little of the time | | 3 Some of the time | 4 Most of the time | 5 All of the time |
| 5. I am able to complete patient visits without being caught off-guard by unanticipated questions or concerns. | 1 Never | 2 A little of the time | | 3 Some of the time | 4 Most of the time | 5 All of the time |
| *Answer the following only after the collaborative documentation process has been implemented.* | | | | | | |
| What do you like most about the expanded rooming and discharge protocols?  How could we improve the expanded rooming and discharge protocols? | | | | | | |

**Step 2: Calculate the professional satisfaction score for each clinician in the practice**

*Instructions: Transfer the numeric responses from the survey in Step 1 (questions 1-5) to the table below then calculate the average survey score for each clinician. The numerator is the sum of survey response values. The denominator is the total number of questions answered on the survey.*

*Open-ended questions on the survey are not included in the numeric scoring. You may wish to list all of these comments for your clinic leadership or care team to review when they look at the survey results. These could help focus continued quality improvement efforts as the team adopts the new process.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Participating clinicians** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Question 1 |  |  |  |
| Question 2 |  |  |  |
| Question 3 |  |  |  |
| Question 4 |  |  |  |
| Question 5 |  |  |  |
| Add survey response values (numerator) |  |  |  |
| Total number of questions answered (denominator) |  |  |  |
| Determine clinician professional satisfaction score (numerator divided by denominator)  **Data to include in Step 3 🡪** |  |  |  |

**Step 3: Calculate the professional satisfaction score for all clinicians in the practice**

*Instructions: Determine the average professional satisfaction score for all clinicians in the practice. Populate the chart below with individual clinician data calculated in Step 2. The numerator is the sum of the average scores for all submitted clinician surveys. The denominator is the total number of clinicians to complete a survey.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Participating clinicians** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Clinician 1: |  |  |  |
| Clinician 2: |  |  |  |
| Clinician 3: |  |  |  |
| … |  |  |  |
| Clinician 10: |  |  |  |
| Add clinician professional satisfaction scores (numerator) |  |  |  |
| Total number of clinicians included (denominator) |  |  |  |
| Calculate practice professional satisfaction scores (numerator divided by denominator)  **Data to include in Step 4 🡪** |  |  |  |

**Step 4: Graph your results**

*Instructions:* *Use a charting tool to graph the professional satisfaction score for your practice before and after implementation of the expanded rooming and discharge process. Your graph might look like the run chart below. Use this to discuss how you can improve the process with your team.*

Start of expanded rooming and discharge

# Measurement tool 3: Patient experience survey

**Step 1: Survey your patients**

*Purpose:**The purpose of this survey is to measure patient satisfaction and understand the patient experience as it relates to expanded rooming and discharge in the practice.*

*Instructions: Measure the patient experience before and after implementation by distributing this survey to patients at three time points: (1) at least one week before starting the new rooming and discharge process, which will serve as baseline data; (2) 12 weeks after implementation; and (3) 24 weeks after implementation. Use the same day of the week each time you distribute surveys. Ask a member of the care team to issue the survey to every patient* ***after*** *their visit with the provider and identify a place for patients to anonymously submit completed surveys. Aim to collect 30 survey responses. Use survey results to identify opportunities for performance improvement.*

*The shaded gray cells have been included to guide you in transferring data through this multi-step tool and determining the value of your first time point.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Patient Survey** | | | | | | |
| Survey number: | | | Date of Survey: | | | |
| During this visit, did someone stay in the exam room with you and the doctor and take notes on the computer?  ⬜Yes ⬜No | | | | | | |
| *How much do you agree or disagree with the following statements? Please circle your answer.* | | | | | | |
| 1. I feel good about my medical visit. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 2. I felt that my care was well organized. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 3. I felt that I received comprehensive care -- that is, the care team covered all of my health-related needs. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 4. My doctor or provider focused on my main concerns during this visit. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 5. I left my appointment understanding the instructions for my care (e.g., which medications to take). | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |

**Step 2: Calculate a satisfaction score for each patient**

*Instructions: Transfer the numeric responses from the survey in Step 1 (questions 1-5) to the table below then calculate the average survey score for each patient. The numerator is the sum of survey response values. The denominator is the total number of questions answered on the survey.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Survey number:** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Question 1 |  |  |  |
| Question 2 |  |  |  |
| Question 3 |  |  |  |
| Question 4 |  |  |  |
| Question 5 |  |  |  |
| Add survey response values (numerator) |  |  |  |
| Total number of questions answered (denominator) |  |  |  |
| Determine patient satisfaction score (numerator divided by denominator)  **Data to include in Step 3 🡪** |  |  |  |

**Step 3: Calculate the practice patient satisfaction score**

*Instructions: Determine the average satisfaction score for all patients in the practice. Populate the chart below with individual patient data calculated in Step 2. The numerator is the sum of the average scores for all submitted patient surveys. The denominator is the total number of patients to complete a survey.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Participating patients** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Survey number: 1 |  |  |  |
| Survey number: 2 |  |  |  |
| Survey number: 3 |  |  |  |
| … |  |  |  |
| Survey number: 30 |  |  |  |
| Add patient satisfaction scores (numerator) |  |  |  |
| Total number of patients included (denominator) |  |  |  |
| Calculate patient satisfaction scores (numerator divided by denominator)  **Data to include in Step 4 🡪** |  |  |  |

**Step 4: Graph your results**

*Instructions:* *Use a charting tool to graph the patient satisfaction score for your practice before and after implementation of the expanded rooming and discharge process. Your graph might look like the run chart below. Use this to discuss how you can improve the process with your team.*

Start of expanded rooming and discharge

# Measurement tool 4: Staff experience survey

**Step 1: Survey your staff**

*Purpose:**The purpose of this survey is to measure satisfaction to understand the staff experience as it relates to expanded rooming and discharge in the practice.*

*Instructions: Each staff member in the practice should complete this survey at three time points: (1) at least one week before starting the new expanded rooming and discharge process, which will serve as baseline data; (2) 12 weeks after implementation; and (3) 24 weeks after implementation. Complete this survey to identify opportunities for performance improvement.*

*The shaded gray cells have been included to guide you in transferring data through this multi-step tool and determining the value of your first time point.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Staff Survey** | | | | | | |
| Staff name (optional): | | | Date of Survey: | | | |
| Did you work with a physician during today’s clinic session to assist with documentation? ⬜Yes ⬜No | | | | | | |
| *How much do you agree or disagree with the following statement? Please circle your answer.* | | | | | | |
| 1. I feel that the work that I do improves the quality of patient care. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 2. My professional skills are used to the fullest at this clinic. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 3. The tasks that I am asked to do each day are manageable. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| 4. People at all levels of our clinic give feedback to improve the way we do things. | 1 Strongly disagree | 2 Disagree | | 3 Neutral | 4 Agree | 5 Strongly agree |
| *Answer the following only after the collaborative documentation process has been implemented.* | | | | | | |
| What do you like most about the expanded rooming and discharge protocols?  How could we improve the expanded rooming and discharge protocols? | | | | | | |

**Step 2: Calculate the professional satisfaction score for each staff member in the practice**

*Instructions: Transfer the numeric responses from the survey in Step 1 (questions 1-4) to the table below then calculate the average survey score for each staff member. The numerator is the sum of survey response values. The denominator is the total number of questions answered on the survey.*

*Open-ended questions on the survey are not included in the numeric scoring. You may wish to list all of these comments for your clinic leadership or care team to review when they look at the survey results. These could help focus continued quality improvement efforts as the team adopts the new process.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Staff name (if provided):** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Question 1 |  |  |  |
| Question 2 |  |  |  |
| Question 3 |  |  |  |
| Question 4 |  |  |  |
| Add survey response values (numerator) |  |  |  |
| Total number of questions answered (denominator) |  |  |  |
| Calculate staff member professional satisfaction score (numerator divided by denominator)  **Data to include in Step 3 🡪** |  |  |  |

**Step 3: Calculate the professional satisfaction score for all staff in the practice**

*Instructions: Determine the average professional satisfaction score for all staff members in the practice. Populate the chart below with individual staff data calculated in Step 2. The numerator is the sum of the average scores for all submitted staff professional satisfaction surveys. The denominator is the total number of staff to complete a survey.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Participating staff** | **Week 0**  **(Pre-implementation)** | **Week 12**  **(Post-implementation)** | **Week 24**  **(Post-implementation)** |
| Staff 1: |  |  |  |
| Staff 2: |  |  |  |
| Staff 3: |  |  |  |
| … |  |  |  |
| Staff 10: |  |  |  |
| Add staff professional satisfaction scores (numerator) |  |  |  |
| Total number of staff members included (denominator) |  |  |  |
| Calculate practice professional satisfaction scores (numerator divided by denominator)  **Data to include in Step 4 🡪** |  |  |  |

**Step 4: Graph your results**

*Instructions:* *Use a charting tool to graph the professional satisfaction score for your practice before and after implementation of the expanded rooming and discharge process. Your graph might look like the run chart below. Use this to discuss how you can improve the process with your team.*

Start of expanded rooming and discharge

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# Additional Information

**What else should you measure?**

If your expanded rooming and discharge protocols involve keeping preventive care (e.g., immunizations, cancer screenings or routine laboratory tests) for patients current or screening them for conditions (e.g., depression, smoking or substance abuse), it can improve your clinical quality measures. You may choose to measure selected quality indicators and monitor them periodically as you implement the new process.

For additional information on implementing quality improvement efforts in your practice, contact the AMA at [StepsForward@ama-assn.org](mailto:StepsForward@ama-assn.org).

**Sources for scales**

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