



# CPD ECOACH

## SAMPLE RESPONSE 1 – OFFICE WORKFLOW

### STEP 1: DEFINE YOUR TOPIC

**1.1** Think back to what inspired you to change and improve your practice. Briefly summarize the encounter or situation. Consider the following questions as you reflect:

- What about the situation made you feel challenged or uncomfortable?
- What specifically piqued your interest?

We have been having some challenges with the staff. The communication between the physicians and the MOAs/office staff hasn't been great. The staff is unhappy with the office manager and feels that she is bossing them around and always being critical. The Office Manager thinks that the staff are being lazy and not working to their potential. The physicians are feeling like small jobs are not being done that would improve the workflow and make their lives easier. For example, patients arrive for appointments and pull out Driver Medical forms to be filled in when they are seeing the doctor. This disrupts the patient visit when the visual exam must be done and other tasks done in order for the form to be properly filled. Also, the staff finds that each doctor has a different way of wanting certain things done, like having weights and BPs done before or after, by staff or by physicians. It all makes the office chaotic!

**1.2** What area(s) of your practice would you like to focus on?

Improving office workflow and efficiencies

**1.3** What specifically would you like to improve in your practice? Define your improvement goal(s). It should be specific, measureable, achievable, realistic, and time-bound (SMART).

I want to improve workflow and communication between the staff so we can serve patients more efficiently within the next two months.

**Time spent completing Step 1 (in hours): 0.25**

### STEP 2: SELF-DIRECTED ASSESSMENT: MEASUREMENT

#### STEP 2A: CREATING A MEASUREMENT STRATEGY

**2A.1** List one or more measures you can use to assess your progress towards your improvement goal(s).

- i. Level of staff satisfaction with office workflow
- ii. Patient experience of administrative processes

**2A.2** After considering the different types of information sources, you may need to refine the measures you listed previously. Did you refine your list of things to measure?

No

**2A.3** If yes, what are your new measures?

n/a

**2A.4** How will you collect the information for your measures?

- If you are using an EMR, what queries will you run?
- If you are using other existing information sources, what are they?
- If you are creating your own information source, describe your collection process

I've decided to use information from our staff survey and patient feedback. My office conducts a quarterly staff survey that is submitted anonymously. We also ask patients to complete an optional feedback form after each visit.

The completed forms are stored in a filing cabinet in the office. With the assistance of the office manager, I will go over the forms and identify any comments/entries related to workflow management, efficiency and/or satisfaction.

**2A.5** What do you predict your practice baseline will be?

I expect the level of satisfaction with office workflow reported by staff to be low. There will probably be specific instances of poor workflow or inefficiency identified by staff. I don't expect to find a lot of negative comments or concerns from the patient feedback.

**STEP 2B: GATHERING THE INFORMATION****2B.1** Was your baseline what you expected? If not, does it change your improvement plan?

The number of completed staff survey and patient feedback form was less than I expected. 33% (1 out of 3) of staff members who completed the last two quarterly surveys indicated they were unsatisfied or had any concerns with office workflow. On the other hand, there were a lot more comments from patients on challenges experienced with the office's administrative process than I anticipated. This means patient experience is being affected negatively in a greater way than I thought.

It appears staff members were more comfortable talking about the concerns they had than putting them down in the staff survey. The high number of comments from patients around challenges experienced indicates workflow is a high priority area that needs to be addressed. We should also probably make a plan to look at the patient feedback forms more regularly so we can identify areas for improvement faster.

**Time spent completing Step 2 (in hours): 2.5**

## STEP 3: CREATE AN IMPROVEMENT PLAN

**3.1** Based on your comparisons with clinical guidelines, what values for your measures will indicate success? How will you know when you have achieved your improvement goal(s)?

Having a workflow plan and a communication channel improves office efficiency and team work which in turn, improves the quality of care provided and patient experience. Team huddles have been shown to improve office efficiency and teamwork

<http://www.aafp.org/fpm/2007/0600/p27.html>

By the end of the month, we will have developed a schedule for a weekly team huddle to help improve office workflow and communication between staff.

**3.2** Generate your improvement plan.

### Action Plan

What needs to be done? Break down your goal(s) into a series of smaller action steps so it doesn't seem too overwhelming or difficult to achieve. This allows you to create milestones and generate a logical pathway for achieving your improvement goal(s).

Action Steps	Deadline	Resources/ Supports	Potential Challenges	Evidence of Success
Plan a weekly office huddle day, time, duration	1 week (January 7, 2017)	Meetings with physicians and staff	Won't get buy in or find a day that works for huddle	Weekly huddle is scheduled
Develop a plan for improving an office/practice issue/opportunity at each huddle	2 weeks (January 14, 2017)	MOA Office Manger Physicians	No consensus on a plan at a huddle	Plan documented at end of each weekly huddle
Document the huddle plan and the outcomes to report at next scheduled huddle	Every week from January 14, 2017 to (January 31, 2017)	MOA Office Manager Physicians Notebook to document plan and record measures decided on	Plan not documented or measured	Weekly report on how the plan was implemented and continued, with measures to show whether there was improvement

**3.3** Which CanMEDS-FM roles do your goals fit under?

	CanMEDS Role	Description
X	Collaborator	Works with patients, families, healthcare teams, other health professionals, and communities to achieve optimal patient care.



X	Communicator	<i>Facilitates the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.</i>
	Family Medicine Expert	<i>Provides comprehensive, continuing care to patients and their families within a relationship of trust.</i>
	Health Advocate	<i>Responsibly uses expertise and influence to advance the health and well-being of individual patients, communities, and populations.</i>
X	Professional	<i>Committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour.</i>
	Scholar	<i>Demonstrates a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of knowledge.</i>
	Leader/Manager	<i>Uses resources wisely and organizes practices which are a resource to their patient population to sustain and improve health, coordinating care within the other members of the health care system.</i>

**3.4** How confident do you feel about following through on your plan (on a scale from 0 to 10 with 10 being very confident)?

8

**3.5** If you answered **less than 7**, what might you change in your plan to increase your confidence?

n/a

**Time spent completing Step 3 (in hours): 1**

## STEP 4: EVALUATE THE IMPLEMENTATION

**4.1** Did you observe any changes in your measures?

Yes

**4.1(1)** Describe the changes.

We decide on a regularly scheduled office huddle on Thursday at 0830 for 15 minutes. We did this four Thursdays in a row.  $\frac{3}{4}$  staff members attended each huddle (one was not working Thursday mornings and was informed of the weekly plan on Friday – she gave input by suggestions to the office manager). All three doctors in the office attended 3 of the 4 huddles, only two were at the 2<sup>nd</sup> huddle. We implemented three plans at the 1<sup>st</sup>, 3<sup>rd</sup> and 4<sup>th</sup> huddle (the 2<sup>nd</sup> huddle just continued the previous week’s plan with a bit of tweaking).

The implementations brought about some successful practice improvements:



- i. One related to getting up to date demographics on each patient phoning in or showing up at an appointment if their demographics weren't current in the last year.
- ii. The second huddle plan was for the staff to ask patients if they had any forms that needed to be filled when the appointment was made and when they presented to the office, to put a demographic label on the forms as appropriate.
- iii. The last huddle plan was to rotate staff doing the phone answering, exam room clean-up and patient delivery to the exam room daily.

We will continue our weekly huddles and may have some plan for measurement/evaluation go on longer than 1 week. We need to follow up on old plans to make sure that they are sustained. We need ongoing measurement/evaluation for each practice change.

**4.1(2)** What are some reasons why there was no change? Do you need to reconsider your improvement plan. If so, how?

n/a

**4.2** Did you encounter unanticipated challenges or barriers while implementing your improvement plan?

Yes

**4.2(1)** If yes, what were the challenges and how did you manage them?

We realized that we won't be able to have everyone at every huddle and we need to have a good communication plan to keep everyone informed and feel part of the process. We will have a whiteboard with the week's plan posted in the coffee room with a suggestion box under it to collect suggestions for huddle plans. We will keep a notebook with a pen attached to document daily how the plan is going, either with measurement, comments or both.

Ongoing measurement and evaluation of each office/practice change is key for sustaining improvements. We will also keep track on the whiteboard of how we are doing with sustaining "old huddle plans."

**4.3** Has there been a change in your comfort level/confidence in managing the situation/encounter?

Yes

**4.4** Describe any steps you can take to increase your comfort level/confidence.

No. I will continue doing this.

**4.5** How will you use the results of your improvement plan to inform your practice in the future? Describe your next steps.

I will continue doing this and will work on sustainability and evaluation.

**Time spent completing Step 4 (in hours): 1**



**Total time spent on Steps 1 to 4 (in hours): 4.75**

**Mainpro+ credits earned: 14.25**