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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Processes** | | | | | | | |
| * Review, adapt and distribute the Core and Supporting Processes evaluation form to ALL practice staff. Be sure the list is accurate for your practice and then ask staff to evaluate the CURRENT state of these processes. Rate each process by putting a tally mark under the heading which most closely matches your understanding of the process. Also mark if the process is a source of patient complaints.   Tally the results to give the Lead Team an idea as to where to begin to focus improvement from the staff perspective.   * **Steps for Improvement:**  Explore improvements for each process based on the outcomes of this assessment tool. Each of the processes below should be flowcharted in its’ current state. Once you have flowcharted the current state of your processes and determined your Change Ideas, use the PDSA Cycle Worksheet to run tests of change and to measure. | | | | | | | |
| **Primary Care Practice Know Your Processes**  **Core and Supporting Processes** | | | | | | | |
| **Processes** | **Works Well** | **Small Problem** | **Real Problem** | **Totally Broken** | **Cannot Rate** | **We’re Working On It** | **Source of Patient Complaint** |
| Answering Phones |  |  |  |  |  |  |  |
| Appointment System |  |  |  |  |  |  |  |
| Messaging |  |  |  |  |  |  |  |
| Scheduling Procedures |  |  |  |  |  |  |  |
| Order Diagnostic Testing |  |  |  |  |  |  |  |
| Reporting Diagnostic Test Results |  |  |  |  |  |  |  |
| Prescription Renewal |  |  |  |  |  |  |  |
| Making Referrals |  |  |  |  |  |  |  |
| Pre-authorization for Services |  |  |  |  |  |  |  |
| Billing/Coding |  |  |  |  |  |  |  |
| Phone Advice |  |  |  |  |  |  |  |
| Assignment of Patients to Your Practice |  |  |  |  |  |  |  |
| Orientation of Patients to Your Practice |  |  |  |  |  |  |  |
| New Patient Workups |  |  |  |  |  |  |  |
| Minor Procedures |  |  |  |  |  |  |  |
| Education for Patients/Families |  |  |  |  |  |  |  |
| Prevention Assessment/Activities |  |  |  |  |  |  |  |
| Chronic Disease Management |  |  |  |  |  |  |  |
| Palliative Care |  |  |  |  |  |  |  |
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https://clinicalmicrosystem.org/Outpatient-primary-care-workbook.doc