AMGA’s Provider Satisfaction Survey: A VERY Brief Overview

Mark Miller
Director of Survey Studies and Research
Three AMGA surveys

1. Provider Satisfaction Survey
2. Patient Satisfaction Survey
3. Employee Satisfaction and Engagement Survey
Intended Survey Uses

• Determine how satisfied providers are on multiple factors
• Benchmark results against other groups from across the nation
• Produce actionable information to drive improvements
• Create a culture of high satisfaction and superior care delivery
The Survey Instrument

- Cost-effective, valid tool
- Based on year-long series of psychometric evaluations
- 60 items on core survey
- Respondents guaranteed complete anonymity
- Most groups use web survey tool
- Average response rate of 65%
The 12 Survey Dimensions

1. Leadership and communications
2. Time spent working
3. Quality of care
4. Patient interactions
5. Administrators
6. Compensation
7. Staff relationships
8. Resources
9. Acceptance by colleagues
10. Computers
11. Paperwork
12. Preauthorization hassles
Survey Database

- 110 groups
- 15,000 providers, 90% physicians
- 2/3rds survey at least some non-physicians
Reporting

• Analyses at overall group, site, and specialty levels
• Specialty-specific norms and best practice benchmarks (45 specialties)
Important Report Metrics

- Percentile rankings on each dimension and overall satisfaction
- Demographic breakouts
- Targeting improvement map
AMGA Provider Satisfaction Targeting Improvement Map

Dimensions in this quadrant are areas where your group scored above the 50th percentile but the dimensions are not as highly correlated with overall satisfaction.

Dimensions in this quadrant are areas where your group scored above the 50th percentile and the dimensions are highly correlated with overall satisfaction.

Dimensions in this quadrant have significant room for improvement but are less correlated with overall satisfaction.

Dimensions in this quadrant are PREFERENCES FOR IMPROVEMENT: clinic score is below 50th percentile in an area highly correlated with overall satisfaction.

AMGA Correlation with Overall Satisfaction

Low

High

Clinic Percentile Ranking on the Dimension

25th

50th Percentile

75th
Enhancing Provider Satisfaction in a Rapidly Growing Medical Group

Kevin McCune MD

Chief Medical Officer
Advocate Medical Group
Downers Grove, Illinois
Advocate Health Care – Sites of Care

13 Hospitals
9 acute care hospitals
1 children’s hospital
3 major teaching hospitals

2 Physician Groups
1,300 employed

Home Care Company
Laboratory Joint Venture
Over 200 Sites of Care
3.4 Million Patients Served
34,000 Associates
Total Revenue $4.6B
AA Rating
AMG History

• Advocate Medical Group came together January 2009
• Merger of:
  – Advocate Medical Group North
  – Advocate Health Centers
  – Christ Medical Group
  – Illinois Masonic Physician’s Group
  – Ambulatory
  – Behavioral Health
• Acquisition of large cardiology group that is a significant portion of Advocate Health Care
• Acquisition of Midwest Physician Group & BroMenn
AMG Growth History and Projection

Number of Physicians

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013 Projected</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>500</td>
<td>600</td>
<td>700</td>
<td>800</td>
<td>1000</td>
<td>1000</td>
<td>1200</td>
</tr>
</tbody>
</table>
AMG Organizational Highlights

• Physician/administrator team model
• AMG Governing Council – physician led
• Regional structure with service families
• Leadership development and standardized engagement tools
Leadership Development

• Governance to AMGA Annual Conference
• American College of Physician Executives
  – Systems Thinking
  – Health Care Reform and the ACO
  – How to Lead a Meeting
  – Performance Feedback
• Advocate Medical Group Boot Camp
  – Finance and Business Systems
  – Managing to the new ACO and Clinical Integration
  – Crucial Conversations
• Leadership Development Institute Days
  – AMG and Advocate Culture
Measuring Physician Satisfaction

• Annual survey provided by AMGA to measure provider satisfaction
• Reports developed with measurement at AMG, Region, and Site levels
• Complete Transparency
• Site Dyad Accountability; results used in performance reviews and merit increases
# Transparency and Accountability: Tiering by Site

<table>
<thead>
<tr>
<th>Site</th>
<th>Average Dimension Percentile</th>
<th>Tier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deerfield</td>
<td>98</td>
<td>Tier I</td>
</tr>
<tr>
<td>Glenview</td>
<td>96</td>
<td>Tier I</td>
</tr>
<tr>
<td>Buffalo Grove</td>
<td>91</td>
<td>Tier I</td>
</tr>
<tr>
<td>Womens Health CMC</td>
<td>91</td>
<td>Tier I</td>
</tr>
<tr>
<td>Nesset IM Geriatrics</td>
<td>89</td>
<td>Tier I</td>
</tr>
<tr>
<td>OB/GYN Parkside</td>
<td>86</td>
<td>Tier I</td>
</tr>
<tr>
<td>Musculoskeletal Center Nesset</td>
<td>85</td>
<td>Tier I</td>
</tr>
<tr>
<td>Neonatology North</td>
<td>81</td>
<td>Tier I</td>
</tr>
<tr>
<td>Irving Western</td>
<td>74</td>
<td>Tier II</td>
</tr>
<tr>
<td>Parkside Cardiology</td>
<td>73</td>
<td>Tier II</td>
</tr>
<tr>
<td>Hospitalists South</td>
<td>72</td>
<td>Tier II</td>
</tr>
<tr>
<td>General Surgery Pksd</td>
<td>71</td>
<td>Tier II</td>
</tr>
<tr>
<td>Logan</td>
<td>70</td>
<td>Tier II</td>
</tr>
</tbody>
</table>
Leadership Tool Kit

- Clinician and Associate Rounding
  - Determine key provider concerns
- Stop Light Report
  - Solve ‘the little stuff’
- Monthly Meeting Model
  - Communicate outcomes
- “Key Result Areas”
  - Holding teams accountable
Leader Rounding

An evidence-based practice in which specific questions are asked with every provider on a regular basis.

Expectation

Round once a month if not weekly or daily
# Advocate Experience

**Completed By:** John Jones  
**Date Completed:** 7/15/11

## Associate Rounding Follow Up

The Stop Light Report is a way to update a unit on the status of issue and ideas raised during rounding.

<table>
<thead>
<tr>
<th>Completed / more information</th>
<th>Work in progress</th>
<th>We can't do it now</th>
</tr>
</thead>
<tbody>
<tr>
<td>This is what we've done so far or additional information.</td>
<td>We're working on it—stay tuned.</td>
<td>These are requests that we cannot do at this time and the reason why.</td>
</tr>
<tr>
<td>Revised onboarding process to get new hires up to speed and working more efficiently.</td>
<td>Implementing patient valet parking. Have the process worked out and staff hired.</td>
<td>New mammography machine cannot be purchased at this time. Will discuss this with leadership team for next year's budget.</td>
</tr>
<tr>
<td>Added another phone downstairs to improve our efficiency and responsiveness to patients.</td>
<td>Getting more information from IS about improving the speed of the computers.</td>
<td>Cannot add more staff at this time to reduce the work load. Will discuss work load challenges at our staff meeting to ensure we are making good use of our time.</td>
</tr>
</tbody>
</table>

[Advocate Health Care](https://www.advocatehealthcare.com)  
Inspiring medicine. Changing lives.
Management Accountability

### 2011 KRA Goal Plan for RICHARD H BONE

#### HEALTH OUTCOMES

<table>
<thead>
<tr>
<th>Goal Statement</th>
<th>Key Performance Indicator (KPI)</th>
<th>Weight</th>
<th>Start Date</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>[KEVIN C MCCUNE] Achieve a Clinical Integration score of 87 with a stretch goal of 94 at 4Q2011.</td>
<td>Medical Group Clinical Integration Score</td>
<td>28.0%</td>
<td>01/01/2011</td>
<td>12/31/2011</td>
</tr>
<tr>
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<td>12/31/2011</td>
</tr>
</tbody>
</table>

**Rating Scales:**

<table>
<thead>
<tr>
<th>Scale</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>77</td>
</tr>
<tr>
<td>2</td>
<td>82</td>
</tr>
<tr>
<td>3</td>
<td>87</td>
</tr>
<tr>
<td>4</td>
<td>91</td>
</tr>
<tr>
<td>5</td>
<td>94</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal Statement</th>
<th>Key Performance Indicator (KPI)</th>
<th>Weight</th>
<th>Start Date</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>[KEVIN C MCCUNE] Achieve Influenza Immunizations at 65% with a stretch goal of 75% at March 31, 2011.</td>
<td>Influenza Vaccination Associate Compliance</td>
<td>2.0%</td>
<td>01/01/2011</td>
<td>12/31/2011</td>
</tr>
<tr>
<td>Achieve Influenza Immunizations at 65% with a stretch goal of 75% at March 31, 2011.</td>
<td>Influenza Vaccination Associate Compliance</td>
<td>2.0%</td>
<td>01/01/2011</td>
<td>12/31/2011</td>
</tr>
</tbody>
</table>

**Rating Scales:**

<table>
<thead>
<tr>
<th>Scale</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>51</td>
</tr>
<tr>
<td>2</td>
<td>58</td>
</tr>
<tr>
<td>3</td>
<td>65</td>
</tr>
<tr>
<td>4</td>
<td>70</td>
</tr>
<tr>
<td>5</td>
<td>75</td>
</tr>
</tbody>
</table>

#### PATIENT SATISFACTION

<table>
<thead>
<tr>
<th>Goal Statement</th>
<th>Key Performance Indicator (KPI)</th>
<th>Weight</th>
<th>Start Date</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>[KEVIN C MCCUNE] Achieve a Patient Satisfaction result of the 75th percentile with a stretch goal of 85th percentile for the time period of YTD or Oct. - Dec. 2011 whichever is greater (based on received data).</td>
<td>Patient Satisfaction - Medical Practices</td>
<td>10.0%</td>
<td>01/01/2011</td>
<td>12/31/2011</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<td>10.0%</td>
<td>01/01/2011</td>
<td>12/31/2011</td>
</tr>
</tbody>
</table>

**Total Weight:** 100.0%
2006 AMG North Physician Satisfaction

DIMENSIONS IN TOP LEFT QUADRANT
Clinic is score above 50th percentile but area not highly correlated with overall satisfaction

DIMENSIONS IN TOP RIGHT QUADRANT
Clinic score is above 50th percentile in area highly correlated with overall satisfaction
2009 AMG North Physician Satisfaction

Dimensions in Top Left Quadrant:
Clinic score is above 50th percentile but area not highly correlated with overall satisfaction.

Dimensions in Top Right Quadrant:
Clinic score is above 50th percentile in area highly correlated with overall satisfaction.
# AMG Physician Satisfaction

Based on AMGA Survey

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AMG</strong></td>
<td>70%</td>
<td>77%</td>
<td>82%</td>
</tr>
<tr>
<td><strong>Central</strong></td>
<td>N/A</td>
<td>82%</td>
<td>37%</td>
</tr>
<tr>
<td><strong>South</strong></td>
<td>57%</td>
<td>62%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>City</strong></td>
<td>47%</td>
<td>63%</td>
<td>71%</td>
</tr>
<tr>
<td><strong>North</strong></td>
<td>93%</td>
<td>96%</td>
<td>95%</td>
</tr>
</tbody>
</table>
Thank You Notes

- A powerful way to express appreciation and reinforce desired behaviors.

- **Expectation**: Continuously look for opportunities to recognize others. Write a minimum of 4 per month.
HealthPartners: Who we are

- Integrated care & financing; non-profit
  - 1 million patients; 1,700 physicians
  - HealthPartners Medical Group
  - Stillwater Medical Group
  - Park Nicollet Health Services
- 55 medical and surgical specialties
- 60 primary care clinics
- Multi-payer
- 5 Hospitals:
  - Acute care, level 1 trauma; critical access
How we use the AMGA Survey

• Annual Survey
• Every Clinic/Department/Specialty has own results & creates improvement plans
  – goal is 5% improvement or best practice
• Scores are part of our overall measures and scorecards on quality, experience, cost & people measured
• Overall organizational results are reviewed, measured and improvement plans created
• We share results as part of our recruitment information
• Consider this a continuous improvement process
2012 Dimensions of Provider Satisfaction
Graphed in Descending order of Correlation with Overall Satisfaction
AMGA Correlation with Overall Satisfaction

AMGA Physician Satisfaction Survey 2005

Dimension Percentile Ranking

2005

AMGA Correlation with Overall Satisfaction
System Actions: Clarify & Increase Satisfaction with Compensation

- Supports not drives culture
- Market based
- Physician led
- Overall compensation committee
  - Divisions report in
  - Divisions have representation from physicians
  - Everyone has Quality, Patient Experience, Cost Metrics
EHR Design Principle

• “With any changes: simplify”
• Quantify “click reductions”

ORGANIZATIONAL COMMITMENTS
Support a practice that works for both patients and doctors
• Be Patient Centered
• Support 6 Aims practice and remove barriers at the point of care
• Provide an environment and tools to ensure satisfying and sustainable practices
• Promote 6 Aims care groups
• Create opportunities for 6 Aims centered care
• Provide an environment and tools to ensure satisfying and sustainable practices
• Respect physicians’ and dentists’ time to allow care of patients

DOCTOR/CLINICIAN COMMITMENTS
Excel in clinical expertise and practice
• Be Patient Centered
• Pursue clinical practice consistent with the 6 Aims
• Advance personal and care team expertise and excellence
• Seek and implement best practices of care for patients
• Reduce unnecessary variation in care to support quality, reliability, and customized care based on patients’ needs
• Create innovations for care and care delivery and be open to innovations and ideas for improvement needed in our environment
• Show flexibility and openness to change
• Provide an environment and tools to ensure satisfying and sustainable practices

System Actions: Leadership & Communication
AMGA Correlation with Overall Satisfaction

AMGA Physician Satisfaction Survey 2007

2007

Preauthorization

Computers

Colleagues

Resources

Staff

Compensation

Administration

Patients

Time Working

Leadership

Quality

Dimension Percentile Ranking

25th

50th

75th

Low

High

AMGA Correlation with Overall Satisfaction
System Actions: Create Consistency & Reduce Physician Time Spent Working

• Care Model Process
  – Clarify roles of team members
  – Work to highest level of license
  – Reduce work physicians do not need to do
  – Workflows improved
Feedback & Measurement

Intentional Design of Internal Care Team Level Performance Reporting to Drive Improvement

HPMG Primary Care -- Care Team Scorecard
[Provider Name] -- Care Team -- HP APPLE VALLEY CLINIC

Population Health: Opioid Optimal Process Measure

% Care Plan Rate

04/12 05/12 06/12 07/12 08/12 09/12 10/12 11/12 12/12 01/13 02/13 03/13

Month

Optimal Process Measure
Goal

Population Health: Patients with Shared Visits

% Visit Rate

05/12 06/12 07/12 08/12 09/12 10/12 11/12 12/12 01/13 02/13 03/13

Month

Patients with Shared Visits
Goal

Depression Care - Remission Rate at six months

% Remission Rate

03/12 04/12 05/12 06/12 07/12 08/12 09/12 10/12 11/12 03/13 02/13 03/13

Month

Remission at six months
Goal

Depression Care - Response Rate at six months

% Response Rate

03/12 04/12 05/12 06/12 07/12 08/12 09/12 10/12 11/12 03/13 02/13 03/13

Month

Response at six months
Goal

Would You RECOMMEND the Office?

% Positive Score


Four Rolling Quarters

Positive Score
Goal

Rate the Provider

% Positive Score

2Q2012 3Q2012 4Q2012

Four Rolling Quarters

Positive Score
Goal
## Survey Results: Time Spent Working

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Time you have available for your family and personal life</td>
<td>6%</td>
<td>17%</td>
<td>11%</td>
<td>38%</td>
<td>29%</td>
<td>27%</td>
<td>28%</td>
<td>25%</td>
<td>29%</td>
</tr>
<tr>
<td>Degree of control you have over your schedule</td>
<td>7%</td>
<td>13%</td>
<td>16%</td>
<td>32%</td>
<td>32%</td>
<td>32%</td>
<td>27%</td>
<td>25%</td>
<td>35%</td>
</tr>
<tr>
<td>Amount of time you spend working</td>
<td>8%</td>
<td>18%</td>
<td>15%</td>
<td>34%</td>
<td>24%</td>
<td>22%</td>
<td>23%</td>
<td>22%</td>
<td>24%</td>
</tr>
<tr>
<td>Amount of time you spend with each patient</td>
<td>3%</td>
<td>12%</td>
<td>13%</td>
<td>39%</td>
<td>32%</td>
<td>26%</td>
<td>28%</td>
<td>25%</td>
<td>32%</td>
</tr>
<tr>
<td>The volume of my patient load or panel size is reasonable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>2%</td>
<td>7%</td>
<td>12%</td>
<td>54%</td>
<td>25%</td>
<td>24%</td>
<td>24%</td>
<td>23%</td>
<td>19%</td>
</tr>
<tr>
<td>Disagree</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neither</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2011 © HealthPartners
## System Actions: The Transformed Practice

<table>
<thead>
<tr>
<th></th>
<th>Current Practice</th>
<th>Transformed Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of Practice Day</td>
<td>10.64 hours</td>
<td>9</td>
</tr>
<tr>
<td>Number of Office Visits</td>
<td>18-22</td>
<td>16</td>
</tr>
<tr>
<td>Number of e. and phone.Visits</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Dedicated time for care coordination (min)</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>Total Number of Patient Contacts</td>
<td>18-22</td>
<td>30</td>
</tr>
</tbody>
</table>
System Actions: Time Spent Working

Call, Click, Come in
- E.Visit
- Phone Visit
- Schedule Template

Documentation Efficiency
- EHR Tools
- Voice recognition
- Collaborative
- Documentation
- Screen Size

Exam Room
- Agenda Setting
- Establish Boundaries
- EHR Efficiency
- Closing the Visit
- Use of Interpreters

Care Team
- Care Model Process

Flow Stations
- Proximity to Care Team
- Printer Location
- Inbasket Efficiencies
Time Spent Working: Wider Screens

- More information available of the screen at one time
- Split screen can be used to improve documentation
- Reduces number of clicks and need to scroll
- Estimated savings of 30 min/day
AMGA Correlation with Overall Satisfaction

AMGA Physician Satisfaction Survey 2012

2012

AMGA Correlation with Overall Satisfaction
### AMGA Survey Year vs. Overall Percentile Ranking

<table>
<thead>
<tr>
<th>AMGA Survey Year</th>
<th>Overall Percentile Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>23</td>
</tr>
<tr>
<td>2009</td>
<td>76</td>
</tr>
<tr>
<td>2012</td>
<td>84</td>
</tr>
</tbody>
</table>
Provider Satisfaction at Reliant Medical Group:

Best Practices
AMGA 2013 Institute for Quality Leadership
2012 AMGA Survey Results

- RMG showed significant improvement over a two year period with 41% very satisfied (73 %tile) in 2012
- The top 3 drivers of physician satisfaction were:
  a. Leadership & communication
  b. Time spent working
  c. Compensation
- There was inconsistency between departments and sites
Root Causes of Poor Satisfaction

- Some providers may feel they are not getting the recognition they deserve or their basic daily needs are not being met
- Inconsistent messaging around provider compensation
- RMG primary care providers may feel their time spent working is not as satisfying as they would like
- Our efforts to improve provider satisfaction could be better communicated
- Progress on our plans to improve provider satisfaction have not been regularly measured
Results follow bimodal distribution

- Specialists overall did well - in most cases above AMGA norm
- Primary care did not fare well – most of the concern was with “time spent working” and to some extent compensation
- Some feel their voice has not been heard
2013 Goals for Provider Satisfaction

- 45% Very satisfied
- 75% of departments & sites at AMGA norm
- 95% physician retention rate
The Organization-wide Plan

- Physician rounding and recognition by chairs/chiefs
- Department specific plans to improve provider satisfaction – presented regularly at MLT meetings and reviewed regularly with CMO
- KPO involvement to improve “time spent working” in the IM & FP departments
- Use of “best practices” when discussing compensation
- Pulse surveys
- Engage providers in our plans to improve – inform at medical staff meetings of progress and share pulse survey results
Time Spent Working in Primary Care

- Data gathered on Epic use after hours
- Shadowing providers
- Best practices data
- Epic inbox traffic data
- Comments on pulse surveys
- PCP survey about Epic
## PCP Shadowing Results

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam Room</td>
<td>20%</td>
</tr>
<tr>
<td>Visit doc.</td>
<td>13%</td>
</tr>
<tr>
<td>EMR IB - call</td>
<td>11%</td>
</tr>
<tr>
<td>Comm w staff</td>
<td>9%</td>
</tr>
<tr>
<td>Phone call</td>
<td>7%</td>
</tr>
<tr>
<td>In basket results</td>
<td>7%</td>
</tr>
<tr>
<td>In basket refills</td>
<td>7%</td>
</tr>
<tr>
<td>In basket CC folder</td>
<td>4%</td>
</tr>
</tbody>
</table>
Kaizen will focus on the > 50% of time spent on EMR related work
Reflections from Data Review

- In the majority of cases, the higher the panel size, the more hours spent in EMR and the higher the patient satisfaction.
- Some providers have challenges with time management
- Only 20% of the provider’s day is spent face-to-face with patients
- The providers already have very full plates.
  - Difficult to manage other coverage, FMLA, etc responsibilities
- To move forward, need to have trust in the care team
Countermeasures

1. Develop guidelines for messages sent to the provider’s “CC” folder
2. Standard work for medication list maintenance
3. Revise standard work for refill requests
4. Develop in basket guidelines
5. Implement huddles to allow for communication to focus on in basket messages
6. Develop standard work for handling of MyChart messages
7. Streamline in basket communication between primary care providers and specialists
8. Review and revise existing standard work for lab results
9. Define an escalation process for supporting provider in basket messages
<table>
<thead>
<tr>
<th>Location</th>
<th>Millbury Conference Room</th>
<th>Kaizen Event Target Sheet</th>
<th>Date:</th>
<th>5/22-5/24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event</td>
<td>Time Spent Working Kaizen Event</td>
<td></td>
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<tr>
<td>Team Lead</td>
<td>Ninad Samant, MD</td>
<td></td>
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<tr>
<td>Co-Lead</td>
<td>Laura Poznick/Sharron Staltare</td>
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<table>
<thead>
<tr>
<th>Key Measurement</th>
<th>Start</th>
<th>Target</th>
<th>End</th>
<th>Difference</th>
<th>% Improvement</th>
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</thead>
<tbody>
<tr>
<td>AMGA Provider Satisfaction - % VG Time Spent Working in Internal Medicine</td>
<td>12 %</td>
<td>35%</td>
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<tr>
<td>AMGA Provider Satisfaction - % VG Time Spent Working in Family Practice</td>
<td>28 %</td>
<td>35%</td>
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<tr>
<td>Average time spent doing Epic (Weekday Off Hours) across adult medicine providers</td>
<td>2.38 hours</td>
<td>1.5 hrs</td>
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<tr>
<td>Average time spent doing Epic (Weekends) across adult medicine providers</td>
<td>TBD</td>
<td>TBD</td>
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<tr>
<td>Inbasket management standard work and guidelines</td>
<td>N</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Improvement in quality of inbasket messages</td>
<td></td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Reduction in volume of inbasket messages</td>
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<td>Y</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduction in redundancy of inbasket messages</td>
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<td>Y</td>
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<td></td>
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<tr>
<td>Number of issues addressed by countermeasures</td>
<td></td>
<td>60%</td>
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</table>
Reliant cares!!