## Standard Work Sheet

**PURPOSE:** To ensure that patients who are overdue, do not keep, or ‘no show’ their diabetic eye exam are identified and receive follow up to get them in.

**PROCESS:** Diabetic cancellations and no-shows

**Revision #0 and Date:** 9/1/2017

**Document Owner:** Michael Steinkrauss

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<tr>
<th>Step</th>
<th>Description:</th>
<th>Key Point / Image / Reason</th>
<th>Who</th>
<th>Time</th>
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</thead>
</table>
| 1    | **Resources:**  
Webinar/Slide Deck: Overview of the intervention and the methodology utilized.  
Standard of work: This document; used as a guide to implement countermeasures. May be adapted for future projects.  
A3: Outline of the countermeasure; describes the team, problem, goals, and test.  
Log Sheet: Used to track real or perceived barriers to patient’s keeping their appointment. | Foundation for understanding: The success of quality improvement efforts hinges on involvement and commitment of the entire team.  
Basis for feedback: regular feedback between the team and the staff regarding progress, barriers, and performance is key to building on successes. | All staff | N/A |
| 2    | **Keep a log of patients who:**  
Cancel their yearly diabetic eye exam and are unable to reschedule at the time of the call.  
Or  
Are known to be overdue for their yearly exam  
Or  
No-show for their diabetic exam. | This allows your practice to keep a log of at-risk patients for outreach and scheduling in a timely manner. | Front Desk | 20 sec |
| 3    | **Outreach to the patients:**  
Reach out to the due/overdue patients on a weekly or bi-weekly basis in order to schedule them for their exam. | This is the first step in closing the gap for the patients with diabetes in your patient population. | Front Desk | 20 sec |
| 3a   | **Use the included log sheet:**  
To track the reasons staff and patients identify as to why they cannot keep their scheduled exam or schedule a future exam.  
This is for internal use only – you will need to customize it to your needs. | Communicating with patients allows the practice to identify real or perceived barriers to care. e.g., they don’t want dilation, they moved out of state, or they cannot come during scheduled hours. | Front Desk | 20 sec |
### PURPOSE:
To ensure that patients who are overdue, do not keep, or ‘no show’ their diabetic eye exam are identified and receive follow up to get them in.

### PROCESS: Diabetic Cancellations and No-Shows

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<tbody>
<tr>
<td>4</td>
<td><strong>Pre-Booking:</strong>&lt;br&gt;If patients have received their exam elsewhere or otherwise does not need their exam this year, attempt to schedule their exam for next year at the time of the call.</td>
<td>Allows your practice to identify patients who may no longer be in your patient population, or to get patients scheduled for next year.</td>
<td>Front Desk</td>
<td>1-2 Min.</td>
</tr>
<tr>
<td>5</td>
<td><strong>Monthly - Review the results of the countermeasure:</strong>&lt;br&gt;1. Using the log sheet(s), tally the most common barriers to scheduling patients.</td>
<td>Pulling, tallying, and sharing data allows the practice to continuously learn and adapt its approach to getting patients in for their exams. This is an opportunity for the staff to share their experiences and to brainstorm additional processes to experiment with.</td>
<td>Admin. or Clinician</td>
<td>2-3 Minutes</td>
</tr>
<tr>
<td></td>
<td>2. Pull data on the Clinical Quality Measure for the Diabetes eye exam (117) from your electronic health record (EHR) for the period.</td>
<td>Pulling data from your EHR or via chart audits will get your practice used to obtaining and using data for both quality improvement and for MIPS Quality reporting.</td>
<td>Admin. or Clinician</td>
<td>2-3 Minutes</td>
</tr>
<tr>
<td></td>
<td>3. Display the results/performance on a monthly or quarterly basis. Run charts (charts tracking progress) are automatically created and may be printed from portal.sneptn.org as you enter your data.</td>
<td></td>
<td>Admin. or Clinician</td>
<td>2-3 Minutes</td>
</tr>
<tr>
<td></td>
<td>4. Review the performance with the team/staff including the results and identified barriers.</td>
<td></td>
<td>Admin. or Clinician</td>
<td>5 Minutes</td>
</tr>
<tr>
<td></td>
<td>5. Work with your team/staff to identify additional countermeasures to get patients with diabetes into the office for their yearly exams.</td>
<td></td>
<td>All</td>
<td>10-15 Minutes</td>
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</tbody>
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