TITLE: PRE-VISIT PLANNING

Scope/Purpose: To facilitate care delivery that is collaborative, timely and efficient. To ensure focus of visits is on patient needs and evidenced based care rather than administrative tasks.

Definitions:

EVIDENCED BASED CARE: The conscientious use of current best practice in making decisions about the care of the patient.

MEANINGFUL: The use of electronic health record technology to improve quality, safety, efficiency, and reduce health disparities.

PRE-VISIT PLANNING: An integral component of evidenced based practice. Pre-visit planning is proactive approach to care that ensures each visit is meaningful and well-organized. Pre-visit planning is a process which:

- STREAMLINES OPERATIONS as administrative tasks are shifted ‘out of a patient’s appointment time’ allowing team members to focus on the patient rather than having to review the patient’s chart for details (patient’s account information or opportunities for medical care at the time of the visit).

- PROMOTES EFFICIENCY as cycle time is maintained and schedule disruptions are reduced, necessary care is provided during the visit rather than ‘missed’ (requiring follow-up appointments to perform labs or give needed immunizations and/or phone calls to manage medications/obtain information as to completion of, or results of, recommended consults or tests – consider PM examples) when providers have necessary information available at the time of the visit.

- IMPROVES PATIENT SATISFACTION as more staff time is spent on delivering meaningful care and/or services.

Policy:
To promote meaningful, collaborative, timely and efficient care, HealthPoint recommends all staff involved in patient care utilize pre-visit planning.

Procedure:
1. PRE-VISIT PLANNING TIME-FRAMES:
   Optimally, pre-visit planning should be initiated one to three days prior to the patient’s visit. Should that not be possible, pre-visit planning should occur the day of the visit as clinic schedule allows.

Tips:
- Review daily schedules and use appropriate tools (e.g. checklist, alerts, etc) for each appointment.
- BE DEDICATED: Use down time to perform pre-visit planning. e.g., time patients are with providers or in the lab (as time allows throughout the day)
2. **CATEGORY REVIEW**: Utilizing appropriate tools (checklist, alerts, etc), review the patient’s electronic record to identify and document accordingly:

   a. gaps in care or patient preventative or chronic care needs
      1. Clinical
         a. Diagnosis (High Risk/Complex) Disease
         b. CDSS (Clinical Decision Support System) and Global Alerts
         c. Labs
         d. Consults and Tests
         e. Immunization Schedules
         f. Patient Documents for Immtrec Consent and/or Records

   b. account information including docs and patient balances are current; the patient has an active payer source for the visit and/or the appointment is scheduled correctly:
      1. Front Office
         a. Patient information and documents
         b. Payer Source
         c. Registration Docs
         d. Patient Account Balances
         e. Visit Type Scheduled
         f. Global Alerts
         g. N/S Education

3. **PRIORITIZE CARE PLANNING: (COLLABORATION / COMMUNICATION) (SEE HUDDLE POLICY & PROCEDURE)**

   One-minute hand-off to providers can save ten minutes in the exam room by helping the provider focus the appointment and his/her assessment to best meet the patient’s needs and expectations.

   Communicate information regarding patient needs (labs, necessary immunizations, consults or tests, assistance with translation) during formal or informal huddles to:
   - Providers (so orders can be entered into the medical record or care decisions made).
   - Team members such as lab staff (so lab tests are clear / work flow assessed).
   - Clinic manager (so support can be provided for unusual needs, such as translation line).

**RELATED POLICY:**

Huddles

**REFERENCES:**
See also
(Leave blank if none)

**REQUIRED BY:**
(Leave blank if none)
**ATTACHMENTS/ENCLOSURES:**
- PM Previsit planning checklist
- PM Previsit guidelines
- PM Previsit documentation guidelines

**POLICY/PROCEDURE TRACKING FORM** (to be added as last page of each P&P for documentation of changes)

### TITLE: Pre-Visit Planning – Clinical Staff Guidelines

**Scope/Purpose:** To establish guidelines for pre-visit planning to facilitate care delivery that is collaborative, timely and efficient. To ensure focus of visits is on patient needs and evidenced based care rather than administrative tasks.

**Division/Department:** Clinical staff – All clinics

**Original Date:** April 2016

**Policy/Procedure #:**

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**Implementation:**

- CPIC Approved: 9/16/2016
- Board Approved:  

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### Table 1: Pre-Visit Planning – Clinical Staff Guidelines

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