

FY 18 BCCCNP Evidenced Based Interventions: Provider Assessment and Feedback Implementation Phase

Section 2: Framework for Implementation

Section 1 dealt with developing your plan for Provider Assessment and Feedback EBIs. In this Section a review of steps to help in implementing your plan is discussed. At the end of this document is an EBI Implementation Worksheet to help with documenting the activities you will implement for Provider Assessment and Feedback in your clinic.

Pre-Implementation

Step 1: Determine the Focus of the Provider Assessment and Feedback Intervention

- Determine the scope of what will be included in the provider assessment. To be effective, provider assessment and feedback must evaluate provider performance in delivering or offering screening to clients. You may also choose to focus the intervention in the following ways:
 - Focusing in on multiple cancers or limiting the assessment to one type of cancer
 - Focusing on the performance of an individual provider or a group of providers
 - Comparing the performance of providers to the overall practice or system's screening rate and/or comparing the performance of providers to a standard
- Choosing what to focus on should be discussed and decided by key stakeholders such as the providers who are being assessed, administrative staff who will conduct the chart reviews and quality improvement staff who want to see screening rates increase.
- The practice setting, experience with assessment and feedback, ease of conducting chart reviews through electronic medical records versus manual review, and desired improvements are some of the factors that may influence the focus of the intervention.
- The more defined your area for improvement, the easier it will be to conduct chart reviews and provide feedback – too many measures or areas of improvement can be costly and time consuming to manage.

Step 2: Build Buy-In and Support

- Staff and providers affected by implementing the provider assessment and feedback intervention must be committed to its success. Ways to foster commitment include:
 - Identify a champion who is committed to the provider assessment and feedback process.
 - Educate staff about all facets of the effort, including the benefits, specific goals and objectives, how the goals and objectives will be achieved, and how success will be measured. Use data to the greatest extent possible to demonstrate the need for the increasing screening rates, and supporting high-quality processes.

- Focus on how the implementation process will affect day-to-day activities, so that staff knows what to expect. Solicit input from staff on their concerns about implementation of the intervention and how to minimize its impact.

Step 3: Determine Measures and Review Parameters to Use for the Chart Reviews

- Define what you will measure based upon the focus of the assessment and feedback you determined in Step 1. Measures must be outlined precisely, with specific guidelines as to what should be counted as a “yes” (criteria met) and what should be counted as a “no” (not met).
 - You will need to decide what counts as a complete screening versus incomplete screening.
- Identify the patient population you will use in the chart reviews. The measure you decide to use for the chart reviews should adhere to national screening guidelines and therefore will likely dictate the age range and screening frequency of the patient population to include in the review.

Step 4: Create or Identify Existing Chart Review Tools to Use

- Working with staff identified to conduct the chart reviews, create or identify existing tools to use in completing the chart reviews.
- The chart review tool should allow you to collect individual patient data in a standard way so that you can combine patient data for group analyses. An electronic spreadsheet will allow for calculation of rates, percentages and other statistical data.
- There are several chart review tools available for adaptation. Please see [Appendix A](#) for additional information.

Step 5: Decide How to Give Feedback to Providers

- Giving feedback includes the following:
 - Summarizing chart review results
 - Preparing the results for sharing with providers; for example, preparing written documents that summarize results for example showing the baseline standard and the current level in a graphic format
 - Setting up and conducting a feedback session
- Decide how you will give feedback to providers. Will you have peers providing feedback to one another?
 - Keep in mind this may be sensitive, as some providers do not necessarily want others to have detailed information about their performance.
 - Peer feedback on cancer screening performance will be more acceptable if the providers are accustomed to providing this type of feedback for other services or who have agreed upon this method during the planning and orientation.
- Will you provide feedback in a group setting or one-to-one and how often will you provide feedback?
 - For example, will it be one time or multiple times over a set period of time during which audits are collected? When is the best time to provide feedback

(e.g. over lunch, early morning meetings, regular staff meetings, etc.) It is likely that a one-hour in-person feedback session will be needed to adequately present and discuss assessment findings.

Implementation

Step 1: Conduct Staff and Provider Orientation

- Share with staff and providers who will be involved in the provider assessment and feedback intervention how the intervention will be conducted.
- This in-person orientation session should include the following:
 - Review of purpose of the intervention and timeline
 - Review of chart review tools
 - Review of how the feedback will be delivered
 - Review of tools available to providers for improving screening
 - Identify a point person (usually a key stakeholder or champion) as the main resource person to go to with questions, issues and additional information

Step 2: Conduct the Assessment

- Determine when the chart reviews will begin, and have all the necessary tools and staff in place, as described above.
- Conduct the chart review (manually or electronically) and determine if a patient meets the assessment criteria (e.g. screening was ordered and/or completed).
- Complete the chart review tool (manually or electronically).

Step 3: Provide Feedback

- Using the method you identified during Step 1, pre-implementation, provide feedback to providers. This may be done in a one-to-one or group session and can occur once or on a regular basis over a period of time.
- Ensure there is adequate time to address provider questions and concerns regarding results. Generally, a one hour session, depending on the context of the deliver (i.e. over lunch, group session without lunch, individual session, etc.) is sufficient.
- During the feedback session, allow time for identifying solutions to improve providers' efforts.

Evaluation

Step 1: Monitor Progress during Implementation

- It is important to monitor how implementation of the provider assessment and feedback intervention is going (process measures) while the intervention is being done.
- Convene those responsible for conducting the assessment on a regular basis (for example, monthly if the assessment is recurring) to ask questions about how the intervention is going, including the ability to complete the chart reviews in a timely manner, accessibility of data, etc.
- If holding a meeting to discuss these issues isn't possible, provide the staff with a simple survey and ask them to record their challenges and issues and have them provide suggestions for solutions.

- Monitor initial outcomes to see how effective the provider reminder system is. For example, after the provider gives the recommendation for screening, are they following through with getting the screening test completed?
- Specific measures will be dictated by specific cancer screening you are seeking to increase. If results are lagging, sit down with your team and determine what the potential issues may be and look for solutions.
- Also assess the provider feedback process. Simple evaluation questions after the feedback session can help identify challenges, as well as successes. Examples of questions to ask include:
 - Is the data you received about your screening performance presented in a way that is understandable and helpful? How could it be presented in a more useful way?
 - Do you have unanswered questions about the feedback? If so, what are they?
 - Was the information about how to increase screening rates helpful? Is there other information or tools you need to help increase screening among your patients?

Implementation Worksheet

Complete the following worksheet, based on the implementation framework steps above, to determine what you have and what you need to implement provider assessment and feedback in your practice.

Provider Assessment and Feedback Implementing the EBI Process	Do we have this in place or are we ready to implement?			What to Improve or Develop	Who will do this	Timeline
	Yes – we have this, we’re ready	Yes – but improvements are needed	No - not in place, not ready			
Existing System can support Provider Assessment and Feedback						
Scope of Provider Assessment and Feedback Focusing in on multiple cancers or limiting the assessment to one type of cancer						
Type of Provider Assessment and Feedback Focusing on performance of an individual provider vs. group of providers Comparing the performance of providers to the overall practice or system’s						

Provider Assessment and Feedback Implementing the EBI Process	Do we have this in place or are we ready to implement?			What to Improve or Develop	Who will do this	Timeline
	Yes – we have this, we’re ready	Yes – but improvements are needed	No - not in place, not ready			
Staff Buy in/Support						
Resources In Place						
Implementation Phase Staff Orientation Developed						
Provider Assessment and Feedback Process Developed						
Implementation Plan Finalized: Kick-off date identified						

Provider Assessment and Feedback Implementing the EBI Process	Do we have this in place or are we ready to implement?			What to Improve or Develop	Who will do this	Timeline
	Yes – we have this, we’re ready	Yes – but improvements are needed	No - not in place, not ready			
Process for continuous evaluation identified						

Appendix A

[Links to Resources and Templates](#)

[8 Steps to a Chart Audit for Quality](#)

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Fam Pract Manag. 2008 Jul-Aug;15(7):A3-A8.

[Manual of Intervention Strategies to Increase Mammography Screening Rates](#)

Created by CDC and The Prudential Center for Health Care Research, this manual includes three essential steps and tools that can be used to increase mammography screening rates in clinical settings.